	HARTFORD HO	SPITAL					
	TWELVE MONTHS AC	CTUAL FILING					
	FISCAL YEAR 2012						
	REPORT 100 - HOSPITAL BALAN	CE SHEET INFORM	ATION	ı			
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %		
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE			
I.	<u>ASSETS</u>						
Α.	Current Assets:						
1	Cash and Cash Equivalents	\$60,477,778	\$86,685,189	\$26,207,411	43%		
2	Short Term Investments	\$0	\$0	\$0	0%		
			·				
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$123,703,917	\$149,897,688	\$26,193,771	21%		
4	Current Assets Whose Use is Limited for Current Liabilities	\$3,902,820	\$450,405	(\$3,452,415)			
5	Due From Affiliates	\$16,276,475	\$14,295,347	(\$1,981,128)			
6	Due From Third Party Payers	\$0	\$0	\$0	0%		
7	Inventories of Supplies	\$11,054,903	\$11,444,006	\$389,103	4%		
8	Prepaid Expenses	\$10,118,833	\$8,148,253	(\$1,970,580)			
9	Other Current Assets	\$14,438,542	\$26,338,847	\$11,900,305	82%		
	Total Current Assets	\$239,973,268	\$297,259,735	\$57,286,467	24%		
В.	Noncurrent Assets Whose Use is Limited:						
1	Held by Trustee	\$92,291,655	\$103,637,269	\$11,345,614	12%		
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%		
3	Funds Held in Escrow	\$54,673,488	\$23,210,563	(\$31,462,925)	-58%		
4	Other Noncurrent Assets Whose Use is Limited	\$282,945,295	\$334,431,789	\$51,486,494	18%		
	Total Noncurrent Assets Whose Use is Limited:	\$429,910,438	\$461,279,621	\$31,369,183	7%		
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%		
6	Long Term Investments	\$0	\$0	\$0	0%		
7	Other Noncurrent Assets	\$81,481,163	\$93,329,541	\$11,848,378	15%		
C.	Net Fixed Assets:						
1	Property, Plant and Equipment	\$874,183,913	\$928,717,064	\$54,533,151	6%		
2	Less: Accumulated Depreciation	\$592,931,534	\$638,814,456	\$45,882,922	8%		
	Property, Plant and Equipment, Net	\$281,252,379	\$289,902,608	\$8,650,229	3%		
3	Construction in Progress	\$28,120,510	\$63,169,034	\$35,048,524	125%		
	Total Net Fixed Assets	\$309,372,889	\$353,071,642	\$43,698,753	14%		
	Total Assets	\$1,060,737,758	\$1,204,940,539	\$144,202,781	14%		

	HARTFO	ORD HOSPITAL			
	TWELVE MON	ITHS ACTUAL FILING			
	FISC	CAL YEAR 2012			
	REPORT 100 - HOSPITAL	BALANCE SHEET INFORM	ATION		
(1)	(2)	(2) (3) (4		(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
II.	LIABILITIES AND NET ASSETS				
Α.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$19,542,101	\$27,045,389	\$7,503,288	38%
2	Salaries, Wages and Payroll Taxes	\$18,445,257	\$21,441,478	\$2,996,221	16%
3	Due To Third Party Payers	\$6,850,045	\$3,559,672	(\$3,290,373)	-48%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$16,971,544	\$64,503,933	\$47,532,389	280%
7	Other Current Liabilities	\$57,523,250	\$50,877,177	(\$6,646,073)	-12%
	Total Current Liabilities	\$119,332,197	\$167,427,649	\$48,095,452	40%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$169,208,339	\$171,569,154	\$2,360,815	1%
2	Notes Payable (Net of Current Portion)	\$22,380,467	\$17,241,725	(\$5,138,742)	-23%
	Total Long Term Debt	\$191,588,806	\$188,810,879	(\$2,777,927)	-1%
3	Accrued Pension Liability	\$340,366,785	\$372,843,056	\$32,476,271	10%
4	Other Long Term Liabilities	\$6,957,786	\$35,149,850	\$28,192,064	405%
	Total Long Term Liabilities	\$538,913,377	\$596,803,785	\$57,890,408	11%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$163,006,762	\$169,620,159	\$6,613,397	4%
2	Temporarily Restricted Net Assets	\$82,502,856	\$101,571,787	\$19,068,931	23%
3	Permanently Restricted Net Assets	\$156,982,566	\$169,517,159	\$12,534,593	8%
	Total Net Assets	\$402,492,184	\$440,709,105	\$38,216,921	9%
	Total Liabilities and Net Assets	\$1,060,737,758	\$1,204,940,539	\$144,202,781	14%

	HARTFOI	RD HOSPITAL						
	TWELVE MONT	HS ACTUAL FILING						
	FISCA	AL YEAR 2012						
	REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION							
(1)	(2)	(3)	(4)	(5)	(6)			
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE			
LIIVE	<u>DECOKII TION</u>	AGTORE	AGTOAL	DITTERCENCE	DITTERENCE			
Α.	Operating Revenue:							
	Total Gross Patient Revenue	\$2,049,319,284	\$2,255,761,188	\$206,441,904	10%			
2	Less: Allowances	\$1,175,001,400	\$1,303,734,039	\$128,732,639	11%			
3	Less: Charity Care	\$20,358,606	\$25,394,098	\$5,035,492	25%			
4	Less: Other Deductions	\$0	\$0	\$0	0%			
	Total Net Patient Revenue	\$853,959,278	\$926,633,051	\$72,673,773	9%			
5	Other Operating Revenue	\$121,645,764	\$164,600,638	\$42,954,874	35%			
6	Net Assets Released from Restrictions	\$9,161,084	\$7,374,565	(\$1,786,519)	-20%			
	Total Operating Revenue	\$984,766,126	\$1,098,608,254	\$113,842,128	12%			
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В.	Operating Expenses:							
1	Salaries and Wages	\$433,339,431	\$452,952,481	\$19,613,050	5%			
2	Fringe Benefits	\$128,868,720	\$151,560,400	\$22,691,680	18%			
3	Physicians Fees	\$39,912,214	\$44,286,457	\$4,374,243	11%			
4	Supplies and Drugs	\$125,251,978	\$133,308,976	\$8,056,998	6%			
5	Depreciation and Amortization	\$43,450,600	\$46,274,726	\$2,824,126	6%			
6	Bad Debts	\$12,915,771	\$22,645,968	\$9,730,197	75%			
7	Interest	\$1,556,400	\$4,517,043	\$2,960,643	190%			
8	Malpractice	\$13,661,983	\$12,815,577	(\$846,406)	-6%			
9	Other Operating Expenses	\$164,969,944	\$177,639,982	\$12,670,038	8%			
	Total Operating Expenses	\$963,927,041	\$1,046,001,610	\$82,074,569	9%			
	Income/(Loss) From Operations	\$20,839,085	\$52,606,644	\$31,767,559	152%			
C.	Non-Operating Revenue:							
1	Income from Investments	\$1,540,621	\$4,377,068	\$2,836,447	184%			
2	Gifts, Contributions and Donations	\$650,919	\$804,629	\$153,710	24%			
3	Other Non-Operating Gains/(Losses)	\$6,501,349	\$5,052,682	(\$1,448,667)	-22%			
	Total Non-Operating Revenue	\$8,692,889	\$10,234,379	\$1,541,490	18%			
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$29,531,974	\$62,841,023	\$33,309,049	113%			
	Other Adjustments:							
	Unrealized Gains/(Losses)	(\$10,212,490)	\$28,516,089	\$38,728,579	-379%			
	All Other Adjustments	\$0	\$0	\$0	0%			
	Total Other Adjustments	(\$10,212,490)	\$28,516,089	\$38,728,579	-379%			
	Excess/(Deficiency) of Revenue Over Expenses	\$19,319,484	\$91,357,112	\$72,037,628	373%			
	Principal Payments	\$99,924,420	\$3,376,907	(\$96,547,513)	-97%			

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$561,941,659	\$601,093,875	\$39,152,216	7%
2	MEDICARE MANAGED CARE	\$110,630,965	. , ,	\$18,310,464	17%
3	MEDICAID	\$198,704,049		\$52,957,491	27%
4	MEDICAID MANAGED CARE	\$49,257,525	\$12,244,673	(\$37,012,852)	-75%
5	CHAMPUS/TRICARE	\$8,638,310		(\$1,603,637)	-19%
6	COMMERCIAL INSURANCE	\$10,582,882		\$4,030,791	38%
7	NON-GOVERNMENT MANAGED CARE	\$425,100,286	\$451,950,139	\$26,849,853	6%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$13,165,053	\$15,632,401	\$2,467,348	19%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$1,378,020,729	\$1,483,172,403	\$105,151,674	8%
B.	OUTPATIENT GROSS REVENUE	#404.000.507	#040.007.705	#00 407 400	450/
1	MEDICARE TRADITIONAL	\$184,630,567	\$213,037,705	\$28,407,138	15%
3	MEDICARE MANAGED CARE MEDICAID	\$41,982,330	\$57,463,947 \$141,407,879	\$15,481,617	37%
4	MEDICAID MEDICAID MANAGED CARE	\$91,876,361		\$49,531,518	54%
5	CHAMPUS/TRICARE	\$39,772,454 \$2,057,294	\$10,414,203	(\$29,358,251) \$1,500,517	-74% 73%
6	COMMERCIAL INSURANCE	\$2,057,294	\$3,557,811 \$9,114,525	\$1,500,517	9%
7	NON-GOVERNMENT MANAGED CARE	\$276,977,371	\$303,820,119	\$26,842,748	10%
8	WORKER'S COMPENSATION	\$276,977,371	\$303,620,119	\$20,042,740	0%
9	SELF- PAY/UNINSURED	\$25,660,622	\$33,772,596	\$8,111,974	32%
10	SAGA	\$25,000,022	\$33,772,390	\$0,111,974	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$671,298,555	\$772,588,785	\$101,290,230	15%
	TOTAL GOTT ATIENT GROOD REVENUE	ψ07 1,230,333	ψ112,300,103	ψ101,230,230	1370
c.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$746,572,226	\$814,131,580	\$67,559,354	9%
2	MEDICARE MANAGED CARE	\$152,613,295	\$186,405,376	\$33,792,081	22%
3	MEDICAID	\$290,580,410		\$102,489,009	35%
4	MEDICAID MANAGED CARE	\$89,029,979		(\$66,371,103)	-75%
5	CHAMPUS/TRICARE	\$10,695,604		(\$103,120)	-1%
6	COMMERCIAL INSURANCE	\$18,924,438	\$23,728,198	\$4,803,760	25%
7	NON-GOVERNMENT MANAGED CARE	\$702,077,657	\$755,770,258	\$53,692,601	8%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9		\$38,825,675	\$49,404,997	\$10,579,322	27%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$2,049,319,284	\$2,255,761,188	\$206,441,904	10%
II.	NET REVENUE BY PAYER		1		1
_	INDATION AND DEVENUE				
	INPATIENT NET REVENUE	#000 00F 000	#00F F44 000	CO 440 TO	401
1	MEDICARE TRADITIONAL	\$226,095,092	\$235,544,623	\$9,449,531	4%
2	MEDICARE MANAGED CARE	\$42,578,442	\$47,673,124	\$5,094,682	12%
3	MEDICAID MANAGED CARE	\$58,154,029	\$73,982,994	\$15,828,965 (\$13,076,371)	27%
5	MEDICAID MANAGED CARE	\$17,341,773	\$3,365,502	(\$13,976,271)	-81%
	CHAMPUS/TRICARE	\$3,030,139	\$1,293,910	(\$1,736,229)	-57%
6 7	COMMERCIAL INSURANCE	\$10,060,022	\$4,701,648	(\$5,358,374) \$33,316,742	
8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$232,295,530	\$265,612,272	\$33,316,742 \$0	14% 0%
9	SELF- PAY/UNINSURED	\$0 \$3,336,937	\$0 \$1,953,495	(\$1,383,442)	-41%
10	SAGA				-41% 0%
11	OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0%
11	UTILN	\$0	ΦU	\$0	0%

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
_	TOTAL INPATIENT NET REVENUE	\$592,891,964	\$634,127,568	\$41,235,604	7%
B	OUTPATIENT NET REVENUE	Ø50 000 004	404 740 704	#00.000.000	440/
1	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$58,033,661	\$81,719,721	\$23,686,060	41% 33%
3	MEDICARE MANAGED CARE MEDICAID	\$12,728,190	\$16,988,605	\$4,260,415 \$10,484,835	40%
4	MEDICAID MEDICAID MANAGED CARE	\$26,241,779 \$12,420,216	\$36,726,614 \$2,988,593	(\$9,431,623)	-76%
5	CHAMPUS/TRICARE	\$861,357	\$1,974,865	\$1,113,508	129%
6	COMMERCIAL INSURANCE	\$7,929,430	\$8,578,847	\$649,417	8%
7	NON-GOVERNMENT MANAGED CARE	\$145,689,072	\$156,202,173	\$10,513,101	7%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$6,504,178	\$4,220,376	(\$2,283,802)	-35%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$270,407,883	\$309,399,794	\$38,991,911	14%
С.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$284,128,753	\$317,264,344	\$33,135,591	12%
2		\$55,306,632	\$64,661,729	\$9,355,097	17%
3	MEDICAID	\$84,395,808	\$110,709,608	\$26,313,800	31%
4	MEDICAID MANAGED CARE	\$29,761,989	\$6,354,095	(\$23,407,894)	-79%
5	CHAMPUS/TRICARE	\$3,891,496	\$3,268,775	(\$622,721)	-16%
6		\$17,989,452	\$13,280,495	(\$4,708,957)	-26%
7	NON-GOVERNMENT MANAGED CARE	\$377,984,602	\$421,814,445	\$43,829,843	12%
8		\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$9,841,115	\$6,173,871	(\$3,667,244)	-37%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$863,299,847	\$943,527,362	\$80,227,515	9%
	CTATICTICS BY DAVED				
111.	STATISTICS BY PAYER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	13,321	13,723	402	3%
2	MEDICARE MANAGED CARE	2,474	2,833	359	15%
3	MEDICAID	6,251	8,739	2,488	40%
4	MEDICAID MANAGED CARE	3,241	572	(2,669)	-82%
5	CHAMPUS/TRICARE	238	233	(5)	-2%
6	COMMERCIAL INSURANCE	268	273	5	2%
7	NON-GOVERNMENT MANAGED CARE	14,522	14,425	(97)	
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	359	453	94	26%
10	SAGA	0	0	0	0%
11	OTHER TOTAL DISCHARGES	0	0	0	0%
D	TOTAL DISCHARGES	40,674	41,251	577	1%
B.	PATIENT DAYS MEDICARE TRADITIONAL	00.000	04.007	0.004	40/
1	MEDICARE TRADITIONAL	88,026	91,987	3,961	4%
3	MEDICARE MANAGED CARE MEDICAID	15,309 40.871	18,161 48,913	2,852 8.042	19% 20%
4	MEDICAID MEDICAID MANAGED CARE	9,981	1,994	(7,987)	-80%
5	CHAMPUS/TRICARE	1,665	1,453	(212)	-13%
6	COMMERCIAL INSURANCE	1,296	1,433	343	26%
7	NON-GOVERNMENT MANAGED CARE	64,415	66,708	2,293	4%
8	WORKER'S COMPENSATION	04,413	00,708	2,293	0%
9	SELF- PAY/UNINSURED	1,992	2,477	485	24%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	223,555	233,332	9,777	4%
C.	OUTPATIENT VISITS	225,000		٥,	. 70
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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	MEDICARE TRADITIONAL	69,947	80,876	10,929	16%
2	MEDICARE MANAGED CARE	11,683	17,473	5,790	50%
3	MEDICAID	75,025	105,992	30,967	41%
4	MEDICAID MANAGED CARE	51,338	11,805	(39,533)	-77%
5	CHAMPUS/TRICARE	622	2,751	2,129	342%
6	COMMERCIAL INSURANCE	15,307	4,573	(10,734)	-70%
7	NON-GOVERNMENT MANAGED CARE	93,386	100,459	7,073	8%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	31,471	23,671	(7,800)	-25%
10	SAGA	0	0	0	0%
11	OTHER TOTAL OUTPATIENT VISITS	0	0	0 (4.470)	0%
	TOTAL OUTPATIENT VISITS	348,779	347,600	(1,179)	0%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER	T T			T
Α.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVE	NUF			
1	MEDICARE TRADITIONAL	\$26,962,960	\$25,789,052	(\$1,173,908)	-4%
2	MEDICARE MANAGED CARE	\$7,620,874	\$8,107,149	\$486,275	6%
3	MEDICAID	\$34,576,394	\$52,407,691	\$17,831,297	52%
4	MEDICAID MANAGED CARE	\$17,034,343	\$3,893,548	(\$13,140,795)	-77%
5	CHAMPUS/TRICARE	\$892,802	\$1,312,579	\$419,777	47%
6	COMMERCIAL INSURANCE	\$3,953,244	\$4,751,934	\$798,690	20%
7	NON-GOVERNMENT MANAGED CARE	\$37,781,495	\$40,129,660	\$2,348,165	6%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$21,263,585	\$16,859,852	(\$4,403,733)	-21%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$150,085,697	\$153,251,465	\$3,165,768	2%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU				
1	MEDICARE TRADITIONAL	\$6,417,184	\$13,515,305	\$7,098,121	111%
2	MEDICARE MANAGED CARE	\$1,783,285	\$2,809,679	\$1,026,394	58%
3	MEDICAID	\$7,036,296	\$6,074,071	(\$962,225)	-14%
4	MEDICAID MANAGED CARE	\$3,747,555	\$494,272	(\$3,253,283)	-87%
5	CHAMPUS/TRICARE	\$258,913	\$326,615	\$67,702	26%
6	COMMERCIAL INSURANCE	\$3,917,665	\$1,418,822	(\$2,498,843)	-64%
7	NON-GOVERNMENT MANAGED CARE	\$16,944,508	\$25,833,665	\$8,889,157	52%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$19,583,762	\$697,991	(\$18,885,771)	
10	SAGA OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
11	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	ΦU	ΦU	\$0	0%
	NET REVENUE	\$59,689,168	\$51,170,420	(\$8,518,748)	-14%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS			, , , , ,	
1	MEDICARE TRADITIONAL	10,559	9,979	(580)	-5%
2	MEDICARE MANAGED CARE	2,682	2,930	248	9%
3	MEDICAID	21,579	33,650	12,071	56%
4	MEDICAID MANAGED CARE	12,334	2,736	(9,598)	-78%
5	CHAMPUS/TRICARE	325	607	282	87%
6	COMMERCIAL INSURANCE	2,115	2,493	378	18%
7	NON-GOVERNMENT MANAGED CARE	15,570	16,207	637	4%
8	WORKER'S COMPENSATION	0	0	(2.700)	0%
9	SELF- PAY/UNINSURED	13,389	10,621	(2,768)	-21%
10	SAGA	0	0	0	0%
11	OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT	0	0	0	0%
	VISITS	78,553	79,223	670	1%
		. 0,000	. 5,225	510	1 /0

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
1.	OF ERATING EXICENCE OF GATEGORY				
A.	Salaries & Wages:				
	Nursing Salaries	\$140,350,779	\$140,913,540	\$562,761	0%
	Physician Salaries	\$42,066,899	\$40,875,101	(\$1,191,798)	-3%
3	Non-Nursing, Non-Physician Salaries	\$250,921,753	\$271,163,840	\$20,242,087	8%
	Total Salaries & Wages	\$433,339,431	\$452,952,481	\$19,613,050	5%
В.	Fringe Benefits:				
	Nursing Fringe Benefits	\$41,738,240	\$47,150,448	\$5,412,208	13%
	Physician Fringe Benefits	\$12,510,072	\$13,677,034	\$1,166,962	9%
	Non-Nursing, Non-Physician Fringe Benefits	\$74,620,408	\$90,732,918	\$16,112,510	22%
	Total Fringe Benefits	\$128,868,720	\$151,560,400	\$22,691,680	18%
C.	Contractual Labor Fees:	*		(4	
	Nursing Fees	\$2,302,827	\$501,559	(\$1,801,268)	-78%
	Physician Fees Non-Nursing, Non-Physician Fees	\$39,912,214 \$15,659,253	\$44,286,457 \$4,059,007	\$4,374,243 (\$11.600,246)	11% -74%
	Total Contractual Labor Fees	\$57,874,294	\$48,847,023	(\$9,027,271)	-16%
		,	* ***,****,****	(+=,===,===,	
	Medical Supplies and Pharmaceutical Cost:				
	Medical Supplies	\$98,378,597	\$106,144,740	\$7,766,143	8%
2	Pharmaceutical Costs	\$26,873,381	\$27,164,236	\$290,855	1%
	Total Medical Supplies and Pharmaceutical Cost	\$125,251,978	\$133,308,976	\$8,056,998	6%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$19,270,420	\$20,621,230	\$1,350,810	7%
	Depreciation-Equipment	\$24,180,180	\$25,653,496	\$1,473,316	6%
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$43,450,600	\$46,274,726	\$2,824,126	6%
	Bad Debts:	¢40.045.774	#00.045.000	#0.700.407	750/
1	Bad Debts	\$12,915,771	\$22,645,968	\$9,730,197	75%
G.	Interest Expense:				
	Interest Expense	\$1,556,400	\$4,517,043	\$2,960,643	190%
		¥ 1,000,100	+ 1,= 11,5 15	+- ,,	
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$13,661,983	\$12,815,577	(\$846,406)	-6%
l.	Utilities:	****	***	\$253,975	40%
4					40%
1	Water Natural Gas	\$630,535 \$4 134 740	\$884,510 \$3,390,034		
	Natural Gas	\$4,134,740	\$3,390,034	(\$744,706)	-18%
3					
3 4 5	Natural Gas Oil Electricity Telephone	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179	(\$744,706) (\$4,763) (\$68,679) (\$99,774)	-18% -4% -1% -3%
3 4	Natural Gas Oil Electricity Telephone Other Utilities	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793	-18% -4% -1% -3% 3%
3 4 5	Natural Gas Oil Electricity Telephone	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179	(\$744,706) (\$4,763) (\$68,679) (\$99,774)	-18% -4% -1%
3 4 5 6	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793	-18% -4% -1% -3% 3%
3 4 5 6	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities Business Expenses:	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995 \$17,845,645	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788 \$17,228,491	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793 (\$617,154)	-18% -4% -1% -3% 3% -3%
3 4 5 6 J.	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities Business Expenses: Accounting Fees	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995 \$17,845,645	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788 \$17,228,491	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793 (\$617,154)	-18% -4% -1% -3% 3% -3%
3 4 5 6 J. 1 2	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities Business Expenses: Accounting Fees Legal Fees	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995 \$17,845,645 \$305,094 \$1,654,111	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788 \$17,228,491 \$596,947 \$919,869	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793 (\$617,154) \$291,853 (\$734,242)	-18% -4% -1% -3% 3% -3% -3%
3 4 5 6 J. 1 2	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities Business Expenses: Accounting Fees	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995 \$17,845,645	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788 \$17,228,491	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793 (\$617,154)	-18% -4% -1% -3% 3% -3% -3% 96% -44%
3 4 5 6 1 2 3 4 5	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities Business Expenses: Accounting Fees Legal Fees Consulting Fees Dues and Membership Equipment Leases	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995 \$17,845,645 \$305,094 \$1,654,111 \$6,133,505 \$10,697,075 \$17,190,632	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788 \$17,228,491 \$596,947 \$919,869 \$6,703,443 \$3,278,006 \$8,001,643	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793 (\$617,154) \$291,853 (\$734,242) \$569,938 (\$7,419,069) (\$9,188,989)	-18% -4% -1% -3% 3% -3% -3% -3% -96% -44% 9% -69% -53%
3 4 5 6 1 2 3 4 5 6	Natural Gas Oil Electricity Telephone Other Utilities Total Utilities Business Expenses: Accounting Fees Legal Fees Consulting Fees Dues and Membership	\$4,134,740 \$124,007 \$8,552,415 \$2,886,953 \$1,516,995 \$17,845,645 \$305,094 \$1,654,111 \$6,133,505 \$10,697,075	\$3,390,034 \$119,244 \$8,483,736 \$2,787,179 \$1,563,788 \$17,228,491 \$596,947 \$919,869 \$6,703,443 \$3,278,006	(\$744,706) (\$4,763) (\$68,679) (\$99,774) \$46,793 (\$617,154) \$291,853 (\$734,242) \$569,938 (\$7,419,069)	-18% -4% -1% -3% 3%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
0	Trovol	¢1 910 005	£4 600 460	(¢424.727)	70/
9 10	Travel Conferences	\$1,819,905 \$360,583	\$1,688,168 \$389,244	(\$131,737) \$28,661	-7% 8%
11	Property Tax	\$252,030	\$256,890	\$4,860	2%
12	General Supplies	\$6,037,862	\$6,412,849	\$374,987	6%
13	Licenses and Subscriptions	\$646,334	\$536,248	(\$110,086)	-17%
14	Postage and Shipping	\$821,130	\$935,454	\$114,324	14%
15	Advertising	\$2,005,561	\$5,345,398	\$3,339,837	167%
16	Corporate parent/system fees	\$0	\$8,408,556	\$8,408,556	0%
17	Computer Software	\$0	\$17,019,602	\$17,019,602	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$4,199,649	\$4,199,649	0%
20	Lab Fees / Red Cross charges	\$0	\$27,000,847	\$27,000,847	0%
21	Billing & Collection / Bank Fees	\$0	\$1,532,545	\$1,532,545	0%
22	Recruiting / Employee Education & Recognition	\$0	\$1,272,599	\$1,272,599	0%
23	Laundry / Linen	\$0	\$2,193,749	\$2,193,749	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$2,006,089	\$2,006,089	0%
26	Purchased Services - Medical	\$0	\$2,481,879	\$2,481,879	0%
27	Purchased Services - Non Medical	\$0	\$31,207	\$31,207	0%
28	Other Business Expenses	\$24,007,940	\$15,039,771	(\$8,968,169)	-37%
	Total Business Expenses	\$98,834,316	\$141,787,548	\$42,953,232	43%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$30,327,903	\$14,063,377	(\$16,264,526)	-54%
<u>'</u>	Iviiscellaneous Other Operating Expenses	φ30,321,903	\$14,003,377	(\$10,204,320)	-34 /0
	Total Operating Expenses - All Expense Categories*	\$963,927,041	\$1,046,001,610	\$82,074,569	9%
II.	OPERATING EXPENSE BY DEPARTMENT				
111,	OF ENATING EXICENSE BY DEL ANTIMENT				
A.	General Services:				
1	General Administration	\$169,606,144	\$223,858,461	\$54,252,317	32%
2	General Accounting	\$24,031,527	\$11,936,461	(\$12,095,066)	-50%
3	Patient Billing & Collection	\$18,882,689	\$22,799,098	\$3,916,409	21%
4	Admitting / Registration Office	\$4,417,706	\$4,909,299	\$491,593	11%
5	Data Processing	\$31,521,297	\$38,460,538	\$6,939,241	22%
6	Communications	\$6,023,111	\$3,358,780	(\$2,664,331)	-44%
7	Personnel	\$16,567,665	\$18,012,149	\$1,444,484	9%
8	Public Relations	\$5,817,513	\$9,197,600	\$3,380,087	58%
9	Purchasing	\$3,632,243	\$3,730,438	\$98,195	3%
10	Dietary and Cafeteria	\$12,292,896 \$11,514,007	\$12,071,670	(\$221,226) \$611,720	-2% 50/
11	Housekeeping	\$11,514,097	\$12,125,826	\$611,729	5%
12 13	Laundry & Linen Operation of Plant	\$4,245,600 \$19,534,995	\$5,421,351 \$10,278,603	\$1,175,751 (\$256,302)	28% -1%
13	Security	\$19,534,995 \$5,563,969	\$19,278,693 \$5,386,722	(\$256,302) (\$177,247)	-1% -3%
15	Repairs and Maintenance	\$13,930,170	\$13,163,697	(\$766,473)	-3% -6%
16	Central Sterile Supply	\$4,129,884	\$4,055,719	(\$74,165)	-2%
17	Pharmacy Department	\$32,467,533	\$32,819,441	\$351,908	1%
18	Other General Services	\$12,034,026	\$12,432,163	\$398,137	3%
	Total General Services	\$396,213,065	\$453,018,106	\$56,805,041	14%
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B.	Professional Services:				
1	Medical Care Administration	\$5,777,752	\$6,030,420	\$252,668	4%
2	Residency Program	\$26,446,592	\$28,003,417	\$1,556,825	6%
3	Nursing Services Administration	\$16,987,017	\$17,817,367	\$830,350	5%
4	Medical Records	\$7,649,367	\$8,063,734	\$414,367	5%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
		• • • • • •			
5	Social Service	\$1,473,751	\$1,561,334	\$87,583	6%
6	Other Professional Services	\$2,443,481	\$2,057,577	(\$385,904)	-16%
	Total Professional Services	\$60,777,960	\$63,533,849	\$2,755,889	5%
	0 .10 .				
<u>C.</u>	Special Services:	# 70.057.040	#74 400 000	# 4.400.700	00/
1	Operating Room	\$70,357,013	\$74,483,809	\$4,126,796	6%
2	Recovery Room	\$3,289,130	\$3,202,617	(\$86,513)	-3%
3	Anesthesiology	\$4,264,788	\$4,684,648	\$419,860	10%
4	Delivery Room	\$10,521,679 \$19,090,967	\$10,879,230	\$357,551	3% 4%
<u>5</u>	Diagnostic Radiology Diagnostic Ultrasound	\$893,803	\$19,920,237 \$966,899	\$829,270 \$73,096	8%
7	Radiation Therapy	\$11,084,471	\$11,507,895	\$423,424	4%
8	Radioisotopes	\$3,155,942	\$2,917,001	(\$238,941)	-8%
9	CT Scan	\$2,687,257	\$2,917,001	\$222,835	8%
10	Laboratory	\$24,773,238	\$24,912,516	\$139,278	1%
11	Blood Storing/Processing	\$9,491,732	\$9,838,866	\$347,134	4%
12	Cardiology	\$3,587,694	\$4,893,306	\$1,305,612	36%
13	Electrocardiology	\$1,382,011	\$1,352,048	(\$29,963)	-2%
14	Electroencephalography	\$321,431	\$398,698	\$77,267	24%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$510,149	\$602,927	\$92.778	18%
17	Audiology	\$96,691	\$95,600	(\$1,091)	-1%
18	Respiratory Therapy	\$7,657,653	\$7,810,703	\$153,050	2%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$1,583,550	\$1,694,164	\$110,614	7%
21	Shock Therapy	\$707,116	\$674,316	(\$32,800)	-5%
22	Psychiatry / Psychology Services	\$14,810,203	\$15,235,038	\$424,835	3%
23	Renal Dialysis	\$7,142,708	\$6,983,162	(\$159,546)	-2%
24	Emergency Room	\$25,151,802	\$28,020,335	\$2,868,533	11%
25	MRI	\$2,319,433	\$2,298,638	(\$20,795)	-1%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$366,405	\$174,373	(\$192,032)	-52%
28	Endoscopy	\$4,523,081	\$4,842,323	\$319,242	7%
29	Sleep Center	\$2,150,069	\$2,154,274	\$4,205	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$24,003,555	\$24,733,513	\$729,958	3%
32	Occupational Therapy / Physical Therapy	\$22,291,507	\$25,279,957	\$2,988,450	13%
33	Dental Clinic	\$973,564	\$1,035,146	\$61,582	6%
34	Other Special Services	\$16,811,772	\$18,254,538	\$1,442,766	9%
	Total Special Services	\$296,000,414	\$312,756,869	\$16,756,455	6%
	Routine Services:				
D.	Medical & Surgical Units	\$103,736,856	\$107,106,181	\$3,369,325	3%
2	Intensive Care Unit	\$24,373,267	\$24,159,833	(\$213,434)	-1%
3	Coronary Care Unit	\$4,548,621	\$4,448,655	(\$99,966)	-2%
4	Psychiatric Unit	\$19,697,621	\$20,627,973	\$930,352	5%
5	Pediatric Unit	\$0	\$20,027,973	\$930,33 <u>2</u>	0%
6	Maternity Unit	\$4,215,820	\$4,626,629	\$410,809	10%
7	Newborn Nursery Unit	\$3,880,086	\$3,785,422	(\$94,664)	-2%
8	Neonatal ICU	\$0	\$0	(ψ94,004) \$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$11,020,299	\$13,013,576	\$1,993,277	18%
11	Home Care	\$0	\$0	\$0	0%

	НАГ	RTFORD HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2012								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2010	<u>FY 2011</u>	FY 2012					
A.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$794,806,049	\$ 853,959,278	\$926,633,051					
2	Other Operating Revenue	137,793,737	130,806,848	171,975,203					
3	Total Operating Revenue	\$932,599,786	\$984,766,126	\$1,098,608,254					
4	Total Operating Expenses	920,001,155	963,927,041	1,046,001,610					
5	Income/(Loss) From Operations	\$12,598,631	\$20,839,085	\$52,606,644					
6	Total Non-Operating Revenue	20,981,787	(1,519,601)	38,750,468					
7	Excess/(Deficiency) of Revenue Over Expenses	\$33,580,418	\$19,319,484	\$91,357,112					
В.	Profitability Summary								
1	Hospital Operating Margin	1.32%	2.12%	4.63%					
2	Hospital Non Operating Margin	2.20%	-0.15%	3.41%					
3	Hospital Total Margin	3.52%	1.96%	8.03%					
4	Income/(Loss) From Operations	\$12,598,631	\$20,839,085	\$52,606,644					
5	Total Operating Revenue	\$932,599,786	\$984,766,126	\$1,098,608,254					
6	Total Non-Operating Revenue	\$20,981,787	(\$1,519,601)	\$38,750,468					
7	Total Revenue	\$953,581,573	\$983,246,525	\$1,137,358,722					
8	Excess/(Deficiency) of Revenue Over Expenses	\$33,580,418	\$19,319,484	\$91,357,112					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$178,313,676	\$163,006,762	\$169,620,159					
2	Hospital Total Net Assets	\$427,719,774	\$402,492,184	\$440,709,105					
3	Hospital Change in Total Net Assets	\$23,731,376	(\$25,227,590)	\$38,216,921					
4	Hospital Change in Total Net Assets %	105.9%	-5.9%	9.5%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.45	0.44	0.43					
2	Total Operating Expenses	\$920,001,155	\$963,927,041	\$1,046,001,610					
3	Total Gross Revenue	\$1,901,719,123	\$2,049,319,284	\$2,255,761,188					
4	Total Other Operating Revenue	\$129,170,425	\$121,645,764	\$164,600,638					
5	Private Payment to Cost Ratio	1.14	1.24	1.29					
6	Total Non-Government Payments	\$351,061,602	\$405,815,169	\$441,268,811					

	HART	FORD HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012				
7	Total Uninsured Payments	\$2,515,949	\$9,841,115	\$6,173,871				
8	Total Non-Government Charges	\$719,699,462	\$759,827,770	\$828,903,453				
9	Total Uninsured Charges	\$47,130,779	\$38,825,675	\$49,404,997				
10	Madiaara Daymant to Cast Datia	0.84	0.85	0.88				
	Medicare Payment to Cost Ratio	\$322,002,492						
11 12	Total Medicare Payments Total Medicare Charges	\$841,854,883	\$339,435,385 \$899,185,521	\$381,926,073 \$1,000,536,956				
12	Total Medicare Charges	\$041,004,003	φο99,100,521	\$1,000,536,956				
13	Medicaid Payment to Cost Ratio	0.68	0.68	0.65				
14	Total Medicaid Payments	\$89,927,522	\$114,157,797	\$117,063,703				
15	Total Medicaid Charges	\$293,764,926	\$379,610,389	\$415,728,295				
16	Uncompensated Care Cost	\$29,595,623	\$13,838,056	\$20,089,338				
17	Charity Care	\$27,507,152	\$18,246,408	\$23,839,114				
18	Bad Debts	\$37,824,767	\$12,919,784	\$22,645,965				
19	Total Uncompensated Care	\$65,331,919	\$31,166,192	\$46,485,079				
20	Uncompensated Care % of Total Expenses	3.2%	1.4%	1.9%				
21	Total Operating Expenses	\$920,001,155	\$963,927,041	\$1,046,001,610				
E.	Liquidity Measures Summary							
1	Current Ratio	1.52	2.01	1.78				
2	Total Current Assets	\$203,306,509	\$239,973,268	\$297,259,735				
3	Total Current Liabilities	\$133,620,601	\$119,332,197	\$167,427,649				
4	Days Cash on Hand	14	24	32				
5	Cash and Cash Equivalents	\$33,536,251	\$60,477,778	\$86,685,189				
6	Short Term Investments	0	0	0				
7	Total Cash and Short Term Investments	\$33,536,251	\$60,477,778	\$86,685,189				
8	Total Operating Expenses	\$920,001,155	\$963,927,041	\$1,046,001,610				
9	Depreciation Expense	\$42,312,460	\$43,450,600	\$46,274,726				
10	Operating Expenses less Depreciation Expense	\$877,688,695	\$920,476,441	\$999,726,884				
11	Days Revenue in Patient Accounts Receivable	52.56	49.95	57.64				

	HARTFORD HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012				
12	Net Patient Accounts Receivable	\$ 116,439,803	\$ \$ 123,703,917	\$ 149,897,688				
13	Due From Third Party Payers	\$	0 \$0	\$0				
14	Due To Third Party Payers	\$1,980,66	3 \$6,850,045	\$3,559,672				
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 114,459,140	116,853,872	\$ 146,338,016				
16	Total Net Patient Revenue	, ,		, , ,				
16	Total Net Patient Revenue	\$794,806,049	0 \$ 000,909,270	\$ 926,633,051				
17	Average Payment Period	55.57	47.32	61.13				
18	Total Current Liabilities	\$133,620,601	\$119,332,197	\$167,427,649				
19	Total Operating Expenses	\$920,001,155	\$963,927,041	\$1,046,001,610				
20	Depreciation Expense	\$42,312,46	0 \$43,450,600	\$46,274,726				
21	Total Operating Expenses less Depreciation Expense	\$877,688,695	\$920,476,441	\$999,726,884				
F.	Solvency Measures Summary							
1	Equity Financing Ratio	47.0	37.9	36.6				
2	Total Net Assets	\$427,719,774	\$402,492,184	\$440,709,105				
3	Total Assets	\$910,655,467	\$1,060,737,758	\$1,204,940,539				
4	Cash Flow to Total Debt Ratio	39.0	20.2	38.6				
5	Excess/(Deficiency) of Revenues Over Expenses	\$33,580,418		\$91,357,112				
6	Depreciation Expense	\$42,312,46						
7	Excess of Revenues Over Expenses and Depreciation Expense	\$75,892,878		\$137,631,838				
8	Total Current Liabilities	\$133,620,601		\$167,427,649				
9	Total Long Term Debt	\$60,966,87						
10	Total Current Liabilities and Total Long Term Debt	\$194,587,477		\$356,238,528				
11	Long Term Debt to Capitalization Ratio	12.5	32.2	30.0				
12	Total Long Term Debt	\$60,966,876	\$191,588,806	\$188,810,879				
13	Total Net Assets	\$427,719,774	\$402,492,184	\$440,709,105				
14	Total Long Term Debt and Total Net Assets	\$488,686,650	\$594,080,990	\$629,519,984				
15	Debt Service Coverage Ratio	25.7	0.6	18.0				
16	Excess Revenues over Expenses	\$33,580,418	\$19,319,484	\$91,357,112				
17	Interest Expense	\$614,483	\$1,556,400	\$4,517,043				
18	Depreciation and Amortization Expense	\$42,312,460	\$43,450,600	\$46,274,726				

	HARTFORI	O HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2012								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2010	FY 2011	FY 2012					
19	Principal Payments	\$2,363,100	\$99,924,420	\$3,376,907					
G.	Other Financial Ratios								
		40.4	10.0	40.0					
20	Average Age of Plant	13.1	13.6	13.8					
21	Accumulated Depreciation	\$552,907,136	\$592,931,534	\$638,814,456					
22	Depreciation and Amortization Expense	\$42,312,460	\$43,450,600	\$46,274,726					
Н.	Utilization Measures Summary								
1	Patient Days	220,114	223,555	233,332					
2	Discharges	41,265	40,674	41,251					
3	ALOS	5.3	5.5	5.7					
4	Staffed Beds	630	640	667					
5	Available Beds	-	796	802					
6	Licensed Beds	867	867	867					
6	Occupancy of Staffed Beds	95.7%	95.7%	95.8%					
7	Occupancy of Available Beds	79.3%	76.9%	79.7%					
8	Full Time Equivalent Employees	5,648.0	5,838.3	6,033.5					
I.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	35.4%	35.2%	34.6%					
2	Medicare Gross Revenue Payer Mix Percentage	44.3%	43.9%	44.4%					
3	Medicaid Gross Revenue Payer Mix Percentage	15.4%	18.5%	18.4%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	2.1%	0.0%	0.0%					
5	Uninsured Gross Revenue Payer Mix Percentage	2.5%	1.9%	2.2%					
6 7	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage Total Gross Revenue Payer Mix Percentage	0.4% 100.0%	0.5% 100.0%	0.5% 100.0%					
•	Total Groce November also mix references	100.070	100.070	100.070					
8	Non-Government Gross Revenue (Charges)	\$672,568,683	\$721,002,095	\$779,498,456					
9	Medicare Gross Revenue (Charges)	\$841,854,883	\$899,185,521	\$1,000,536,956					
10	Medicaid Gross Revenue (Charges)	\$293,764,926	\$379,610,389	\$415,728,295					
11	Other Medical Assistance Gross Revenue (Charges)	\$39,291,342	\$0	\$0					
12 13	Uninsured Gross Revenue (Charges) CHAMPUS / TRICARE Gross Revenue (Charges)	\$47,130,779 \$7,108,510	\$38,825,675 \$10,695,604	\$49,404,997 \$10,592,484					
14	Total Gross Revenue (Charges)	\$1,901,719,123	\$2,049,319,284	\$10,592,464					
J.	Non Government Not Revenue Payer Mix Percentage	4E 00/	4E 00/	AC 49/					
1	Non-Government Net Revenue Payer Mix Percentage	45.0%	45.9%	46.1%					

	HARTFORD	HOSPITAL						
	TWELVE MONTH	S ACTUAL FILING						
	FISCAL	YEAR 2012						
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2010	FY 2011	FY 2012				
2	Medicare Net Revenue Payer Mix Percentage	41.6%	39.3%	40.5%				
3	Medicaid Net Revenue Payer Mix Percentage	11.6%	13.2%	12.4%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.3%	0.0%	0.0%				
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	1.1%	0.7%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.3%	0.5%	0.3%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Net Revenue (Payments)	\$348,545,653	\$395,974,054	\$435,094,940				
9	Medicare Net Revenue (Payments)	\$322,002,492	\$339,435,385	\$381,926,073				
10	Medicaid Net Revenue (Payments)	\$89,927,522	\$114,157,797	\$117,063,703				
11	Other Medical Assistance Net Revenue (Payments)	\$9,911,031	\$0	\$0				
12	Uninsured Net Revenue (Payments)	\$2,515,949	\$9,841,115	\$6,173,871				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$1,989,883	\$3,891,496	\$3,268,775				
14	Total Net Revenue (Payments)	\$774,892,530	\$863,299,847	\$943,527,362				
K.	<u>Discharges</u>							
1	Non-Government (Including Self Pay / Uninsured)	16,050	15,149	15,151				
2	Medicare	15,819	15,795	16,556				
3	Medical Assistance	9,230	9,492	9,311				
4	Medicaid	7,923	9,492	9,311				
5	Other Medical Assistance	1,307	-	-				
6	CHAMPUS / TRICARE	166	238	233				
7	Uninsured (Included In Non-Government)	690	359	453				
8	Total	41,265	40,674	41,251				
L.	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	1.372200	1.420200	1.443500				
2	Medicare	1.817300	1.861300	1.894600				
3	Medical Assistance	1.125900	1.206000	1.218800				
4	Medicaid	1.106600	1.206000	1.218800				
5	Other Medical Assistance	1.242900	0.000000	0.000000				
6	CHAMPUS / TRICARE	1.067800	1.179000	1.060600				
7	Uninsured (Included In Non-Government)	1.352200	1.391300	1.372200				
8	Total Case Mix Index	1.486513	1.540094	1.571666				
М.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	16,735	17,014	20,588				
2	Emergency Room - Treated and Discharged	78,670	78,553	79,223				
3	Total Emergency Room Visits	95,405	95,567	99,811				

(1)	(2)	(3)	(4)	(5)	(6)
	` ,	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$5,975,230	\$8,572,097	\$2,596,867	43%
	Inpatient Payments	\$2,032,807	\$3,607,558	\$1,574,751	77%
3	Outpatient Charges	\$1,433,402	\$3,673,469	\$2,240,067	156%
4	Outpatient Payments	\$611,341	\$1,422,396	\$811,055	133%
5	Discharges	103	200	97	94%
6	Patient Days	640	1,237	597	93%
7	Outpatient Visits (Excludes ED Visits)	200	854	654	327%
8	Emergency Department Outpatient Visits	64	172	108	169%
9	Emergency Department Inpatient Admissions	37	45	8	22%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,408,632	\$12,245,566	\$4,836,934	65%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,644,148	\$5,029,954	\$2,385,806	90%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
		4 0		***	
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$31,721,755	\$39,891,921	\$8,170,166	26%
2	Inpatient Payments	\$13,351,516	\$14,954,007	\$1,602,491	12%
3	Outpatient Charges	\$13,015,999	\$19,961,645	\$6,945,646	53%
4	Outpatient Payments	\$4,457,054	\$5,844,437	\$1,387,383	31%
5	Discharges	671	846	175	26%
6	Patient Days	4,010	4,892	882	22%
7	Outpatient Visits (Excludes ED Visits)	2,282	4,533	2,251	99%
8	Emergency Department Outpatient Visits	243	913	670	276%
9	Emergency Department Inpatient Admissions	226	237	11	5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$44,737,754	\$59,853,566	\$15,115,812	34%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$17,808,570	\$20,798,444	\$2,989,874	17%
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(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$10,738,675	\$0	(\$10,738,675)	-100%
2	Inpatient Payments	\$4,082,401	\$0	(\$4,082,401)	-100%
3	Outpatient Charges	\$2,471,988	\$0	(\$2,471,988)	-100%
4	Outpatient Payments	\$133,350	\$0	(\$133,350)	-100%
5	Discharges	190	0	(190)	-100%
6	Patient Days	1,332	0	(1,332)	-100%
7	Outpatient Visits (Excludes ED Visits)	478	0	(478)	-100%
8	Emergency Department Outpatient Visits	384	0	(384)	-100%
9	Emergency Department Inpatient Admissions	380	0	(380)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,210,663	\$0	(\$13,210,663)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,215,751	\$0	(\$4,215,751)	-100%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$7,462,055	\$11,444,647	\$3,982,592	53%
2	Inpatient Payments	\$1,794,238	\$4,890,133	\$3,095,895	173%
3	Outpatient Charges	\$3,167,690	\$5,069,540	\$1,901,850	60%
4	Outpatient Payments	\$662,271	\$1,023,035	\$360,764	54%
5	Discharges	202	262	60	30%
	Patient Days	1,035	2,231	1,196	116%
7	Outpatient Visits (Excludes ED Visits)	633	1,471	838	132%
8	Emergency Department Outpatient Visits	707	296	(411)	-58%
9	Emergency Department Inpatient Admissions	333	77	(256)	-77%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$10,629,745	\$16,514,187	\$5,884,442	55%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,456,509	\$5,913,168	\$3,456,659	141%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN			*-	
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
	,	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$41,998,848	\$52,591,257	\$10,592,409	25%
2	Inpatient Payments	\$16,434,328	\$20,070,936	\$3,636,608	22%
3	Outpatient Charges	\$16,642,215	\$21,596,583	\$4,954,368	30%
4	Outpatient Payments	\$5,455,224	\$6,622,703	\$1,167,479	21%
5	Discharges	975	1,124	149	15%
6	Patient Days	6,275	7,480	1,205	19%
7	Outpatient Visits (Excludes ED Visits)	4,585	5,945	1,360	30%
8	Emergency Department Outpatient Visits	976	1,198	222	23%
9	Emergency Department Inpatient Admissions	335	311	(24)	-7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$58,641,063	\$74,187,840	\$15,546,777	27%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$21,889,552	\$26,693,639	\$4,804,087	22%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
<u> </u>	ACTNA				
I.	AETNA	040 =04 40=	MAG 444 = 2 =	***	
1	Inpatient Charges	\$12,734,402	\$16,441,507	\$3,707,105	29%
2	Inpatient Payments	\$4,883,152	\$4,150,490	(\$732,662)	-15%
3	Outpatient Charges	\$5,251,036	\$7,162,710	\$1,911,674	36%
4	Outpatient Payments	\$1,408,950	\$2,076,034	\$667,084	47%
5	Discharges	333	401	68	20%
6	Patient Days	2,017	2,321	304	15%
7	Outpatient Visits (Excludes ED Visits)	823	1,740	917	111%
8	Emergency Department Outpatient Visits	308	351	43	14%
9	Emergency Department Inpatient Admissions	252	91	(161)	-64%
<u> </u>	TOTAL INPATIENT & OUTPATIENT CHARGES	\$17,985,438	\$23,604,217	\$5,618,779	31%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,292,102	\$6,226,524	(\$65,578)	-1%

(1) (2)	(3)	(4)	(5)	(6)
• • • • • • • • • • • • • • • • • • • •	FY 2011	FY 2012	AMÒÚNT	%
LINE DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J. HUMANA				
1 Inpatient Charges	\$0	\$0	\$0	0%
2 Inpatient Payments	\$0	\$0	\$0	0%
3 Outpatient Charges	\$0	\$0	\$0	0%
4 Outpatient Payments	\$0	\$0	\$0	0%
5 Discharges	0	0	0	0%
6 Patient Days	0	0	0	0%
7 Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 Emergency Department Outpatient Visits	0	0	0	0%
9 Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
<u> </u>				
K. SECURE HORIZONS				
1 Inpatient Charges	\$0	\$0	\$0	0%
2 Inpatient Payments	\$0	\$0	\$0	0%
3 Outpatient Charges	\$0	\$0	\$0	0%
4 Outpatient Payments	\$0	\$0	\$0	0%
5 Discharges	0	0	0	0%
6 Patient Days	0	0	0	0%
7 Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 Emergency Department Outpatient Visits	0	0	0	0%
9 Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
LINIOADE LIEE O LIEAL THINIOHDANIOE				
L. UNICARE LIFE & HEALTH INSURANCE	C O	Φ0	Φ0	00/
1 Inpatient Charges	\$0	\$0	\$0	0%
2 Inpatient Payments	\$0	\$0	\$0	0%
3 Outpatient Charges	\$0	\$0	\$0	0%
4 Outpatient Payments	\$0	\$0	\$0	0%
5 Discharges	0	0	0	0%
6 Patient Days	0	0	0	0%
7 Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 Emergency Department Outpatient Visits	0	0	0	0%
9 Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES				0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
TOTAL IN	PATIENT & OUTPATIENT CHARGES	PATIENT & OUTPATIENT CHARGES \$0	PATIENT & OUTPATIENT CHARGES \$0 \$0	PATIENT & OUTPATIENT CHARGES \$0 \$0 \$0

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.	UNIVERSAL AMERICAN		Ι		Π
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
			l		
II.	TOTAL MEDICARE MANAGED CARE		1		
	TOTAL INPATIENT CHARGES	\$110,630,965	\$128,941,429	\$18,310,464	17%
	TOTAL INPATIENT PAYMENTS	\$42,578,442	\$47,673,124	\$5,094,682	12%
	TOTAL OUTPATIENT CHARGES	\$41,982,330	\$57,463,947	\$15,481,617	37%
	TOTAL OUTPATIENT PAYMENTS	\$12,728,190	\$16,988,605	\$4,260,415	33%
	TOTAL DISCHARGES	2,474	2,833	359	15%
	TOTAL PATIENT DAYS	15,309	18,161	2,852	19%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	9,001	14,543	5,542	62%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	2,682	2,930	248	9%
	TOTAL EMERGENCY DEPARTMENT				_
	INPATIENT ADMISSIONS	1,563	761	(802)	-51%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$152,613,295	\$186,405,376	\$33,792,081	22%
l	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$55,306,632	\$64,661,729	\$9,355,097	17%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD				
A.	OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$27,196,435	\$7,084,486	(\$20,111,949)	-74%
2	Inpatient Payments	\$7,406,664	\$1,845,150	(\$5,561,514)	-75%
3	Outpatient Charges	\$21,744,971	\$6,106,737	(\$15,638,234)	-72%
4	Outpatient Payments	\$6,986,241	\$1,308,493	(\$5,677,748)	-81%
5	Discharges	1,716	291	(1,425)	-83%
6	Patient Days	5,302	1,133	(4,169)	-79%
7	Outpatient Visits (Excludes ED Visits)	20,544	4,999	(15,545)	-76%
8	Emergency Department Outpatient Visits	6,464	1,508	(4,956)	-77%
9	Emergency Department Inpatient Admissions	262	392	130	50%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$48,941,406	\$13,191,223	(\$35,750,183)	-73%
	TOTAL INPATIENT & OUTPATIENT	\$4.4.000.00 5	* 0.450.040	(\$44,000,000)	700/
	PAYMENTS	\$14,392,905	\$3,153,643	(\$11,239,262)	-78%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2011	FY 2012	AMÒÚNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
_					
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
_					
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
	FIRST CHOICE OF CONNECTICUT,				
	PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$7,694,578	\$1,576,427	(\$6,118,151)	-80%
2	Inpatient Payments	\$3,512,597	\$405,765	(\$3,106,832)	-88%
3	Outpatient Charges	\$6,021,112	\$1,553,040	(\$4,468,072)	-74%
4	Outpatient Payments	\$1,837,407	\$516,315	(\$1,321,092)	-72%
5	Discharges	535	83	(452)	-84%
6	Patient Days	1,617	253	(1,364)	-84%
7	Outpatient Visits (Excludes ED Visits)	6,319	1,433	(4,886)	-77%
8	Emergency Department Outpatient Visits	2,033	432	(1,601)	-79%
9	Emergency Department Inpatient Admissions	82	112	30	37%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$13,715,690	\$3,129,467	(\$10,586,223)	-77%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$5,350,004	\$922,080	(\$4,427,924)	-83%
Н.	AETNA				
1	Inpatient Charges	\$14,366,512	\$3,583,760	(\$10,782,752)	-75%
2	Inpatient Payments	\$6,422,512	\$1,114,587	(\$5,307,925)	-83%
3	Outpatient Charges	\$12,006,371	\$2,754,426	(\$9,251,945)	-77%
4	Outpatient Payments	\$3,596,568	\$1,163,785	(\$2,432,783)	-68%
5	Discharges	990	198	(792)	-80%
6	Patient Days	3,062	608	(2,454)	-80%
7	Outpatient Visits (Excludes ED Visits)	12,141	2,637	(9,504)	-78%
8	Emergency Department Outpatient Visits	3,837	796	(3,041)	-79%
9	Emergency Department Inpatient Admissions	156	207	51	33%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$26,372,883	\$6,338,186	(\$20,034,697)	-76%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$10,019,080	\$2,278,372	(\$7,740,708)	-77%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	¢40.257.525	¢40 044 670	(\$27.042.0E2)	-75%
	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$49,257,525	\$12,244,673	(\$37,012,852)	
		\$17,341,773	\$3,365,502	(\$13,976,271)	-81%
	TOTAL OUTPATIENT CHARGES	\$39,772,454	\$10,414,203	(\$29,358,251)	-74%
	TOTAL DISCUARDOS	\$12,420,216	\$2,988,593	(\$9,431,623)	-76%
	TOTAL DISCHARGES	3,241	572	(2,669)	-82%
	TOTAL PATIENT DAYS TOTAL OUTPATIENT VISITS	9,981	1,994	(7,987)	-80%
		20.004	0.000	(20.025)	770/
	(EXCLUDES ED VISITS) TOTAL EMERGENCY DEPARTMENT	39,004	9,069	(29,935)	-77%
		40 224	2 720	(0 E00)	700/
-	OUTPATIENT VISITS	12,334	2,736	(9,598)	-78%
	TOTAL EMERGENCY DEPARTMENT	F00	- 44	644	4007
	INPATIENT ADMISSIONS	500	711	211	42%
	TOTAL INPATIENT & OUTPATIENT	¢00,000,070	¢22 650 070	(¢66 274 402)	750/
	CHARGES TOTAL INPATIENT & OUTPATIENT	\$89,029,979	\$22,658,876	(\$66,371,103)	-75%
	PAYMENTS	¢20.764.000	¢6 254 005	(¢22 407 004)	700/
	FAIMENIS	\$29,761,989	\$6,354,095	(\$23,407,894)	-79%

(1) (2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE

	_	IEALTH CARE CORPO			
	TWELVE	MONTHS ACTUAL FILI	ING		
		FISCAL YEAR 2012			
	REPORT 300 - HOSPI	TAL BALANCE SHEET	INFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
I.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$139,631,000	\$206,896,000	\$67,265,000	48%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$235,816,000	\$272,907,000	\$37,091,000	16%
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,903,000	\$3,105,000	(\$2,798,000)	-47%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$21,927,000	\$22,915,000	\$988,000	5%
8	Prepaid Expenses	\$22,667,000	\$19,105,000	(\$3,562,000)	-16%
9	Other Current Assets	\$36,296,000	\$72,013,000	\$35,717,000	98%
	Total Current Assets	\$462,240,000	\$596,941,000	\$134,701,000	29%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$148,185,000	\$166,612,000	\$18,427,000	12%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$87,044,000	\$52,448,000	(\$34,596,000)	-40%
4	Other Noncurrent Assets Whose Use is Limited	\$571,651,000	\$656,714,000	\$85,063,000	15%
	Total Noncurrent Assets Whose Use is Limited:	\$806,880,000	\$875,774,000	\$68,894,000	9%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$122,878,000	\$150,759,000	\$27,881,000	23%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$1,854,571,000	\$1,941,721,000	\$87,150,000	5%
2	Less: Accumulated Depreciation	\$1,160,721,000	\$1,246,948,000	\$86,227,000	\$0
	Property, Plant and Equipment, Net	\$693,850,000	\$694,773,000	\$923,000	0%
3	Construction in Progress	\$37,713,000	\$95,451,000	\$57,738,000	153%
	Total Net Fixed Assets	\$731,563,000	\$790,224,000	\$58,661,000	8%
	Total Assets	\$2,123,561,000	\$2,413,698,000	\$290,137,000	14%

	HARTFORD I	HEALTH CARE CORPOR	RATION		
	TWELVE	MONTHS ACTUAL FILI	NG		
		FISCAL YEAR 2012			
	REPORT 300 - HOSP	ITAL BALANCE SHEET	INFORMATION		
(1)	(2) DESCRIPTION	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$51,242,000	\$60,923,000	\$9,681,000	19%
2	Salaries, Wages and Payroll Taxes	\$50,662,000	\$58,751,000	\$8,089,000	16%
3	Due To Third Party Payers	\$34,065,000	\$29,931,000	(\$4,134,000)	-12%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$25,230,000	\$81,143,000	\$55,913,000	222%
7	Other Current Liabilities	\$114,112,000	\$125,785,000	\$11,673,000	10%
	Total Current Liabilities	\$275,311,000	\$356,533,000	\$81,222,000	30%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$375,815,000	\$375,815,000	\$0	0%
2	Notes Payable (Net of Current Portion)	\$37,512,000	\$28,176,000	(\$9,336,000)	-25%
	Total Long Term Debt	\$413,327,000	\$403,991,000	(\$9,336,000)	-2%
3	Accrued Pension Liability	\$544,500,000	\$643,721,000	\$99,221,000	18%
4	Other Long Term Liabilities	\$42,466,000	\$97,540,000	\$55,074,000	130%
	Total Long Term Liabilities	\$1,000,293,000	\$1,145,252,000	\$144,959,000	14%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$491,087,000	\$509,479,000	\$18,392,000	4%
2	Temporarily Restricted Net Assets	\$121,465,000	\$147,379,000	\$25,914,000	21%
3	Permanently Restricted Net Assets	\$235,405,000	\$255,055,000	\$19,650,000	8%
	Total Net Assets	\$847,957,000	\$911,913,000	\$63,956,000	8%
	Total Liabilities and Net Assets	\$2,123,561,000	\$2,413,698,000	\$290,137,000	14%

	TWELVE	MONTHS ACTUAL			
		FISCAL YEAR 201			
(4)	REPORT 350 - HOSPITAL S				(0)
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %
<u>LINE</u>	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$3,624,354,000	\$4,294,961,000	\$670,607,000	19%
2	Less: Allowances	\$1,965,691,000	\$2,372,213,000	\$406,522,000	21%
3	Less: Charity Care	\$42,675,000	\$43,000,000	\$325,000	1%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$1,615,988,000	\$1,879,748,000	\$263,760,000	16%
5	Other Operating Revenue	\$177,014,000	\$256,850,000	\$79,836,000	45%
6	Net Assets Released from Restrictions	\$10,961,000	\$10,688,000	(\$273,000)	-2%
	Total Operating Revenue	\$1,803,963,000	\$2,147,286,000	\$343,323,000	19%
В.	Operating Expenses:				
1	Salaries and Wages	\$803,824,000	\$918,718,000	\$114,894,000	14%
2	Fringe Benefits	\$244,010,000	\$284,716,000	\$40,706,000	17%
3	Physicians Fees	\$58,095,000	\$65,155,000	\$7,060,000	12%
4	Supplies and Drugs	\$228,530,000	\$246,175,000	\$17,645,000	8%
5	Depreciation and Amortization	\$81,701,000	\$93,592,000	\$11,891,000	15%
6	Bad Debts	\$35,420,000	\$77,212,000	\$41,792,000	118%
7	Interest	\$6,487,000	\$13,221,000	\$6,734,000	104%
8	Malpractice	\$27,495,000	\$24,038,000	(\$3,457,000)	-13%
9	Other Operating Expenses	\$274,868,000	\$363,883,000	\$89,015,000	32%
	Total Operating Expenses	\$1,760,430,000	\$2,086,710,000	\$326,280,000	19%
	Income/(Loss) From Operations	\$43,533,000	\$60,576,000	\$17,043,000	39%
C.	Non-Operating Revenue:				
1	Income from Investments	\$5,348,000	\$8,146,000	\$2,798,000	52%
2	Gifts, Contributions and Donations	\$1,368,000	\$1,626,000	\$258,000	19%
3	Other Non-Operating Gains/(Losses)	\$4,352,000	\$4,791,000	\$439,000	10%
	Total Non-Operating Revenue	\$11,068,000	\$14,563,000	\$3,495,000	32%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$54,601,000	\$75,139,000	\$20,538,000	38%
	Other Adjustments:				
	Unrealized Gains/(Losses)	(\$18,574,000)	\$54,000,000	\$72,574,000	-391%
	All Other Adjustments	\$190,132,000	\$0	(\$190,132,000)	-100%
	Total Other Adjustments	\$171,558,000	\$54,000,000	(\$117,558,000)	-69%
	Excess/(Deficiency) of Revenue Over Expenses	\$226,159,000	\$129,139,000	(\$97,020,000)	-43%

HARTFORD HEALTH CARE CORPORATION

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5) ACTUAL	
		ACTUAL	ACTUAL		
<u>LINE</u>	DESCRIPTION	FY 2010	FY 2011	FY 2012	
A.	Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$1,242,385,000	\$1,615,988,000	\$1,879,748,000	
2	Other Operating Revenue	184,106,000	187,975,000	267,538,000	
3	Total Operating Revenue	\$1,426,491,000	\$1,803,963,000	\$2,147,286,000	
4	Total Operating Expenses	1,408,349,000	1,760,430,000	2,086,710,000	
5	Income/(Loss) From Operations	\$18,142,000	\$43,533,000	\$60,576,000	
6	Total Non-Operating Revenue	31,845,000	182,626,000	68,563,000	
7	Excess/(Deficiency) of Revenue Over Expenses	\$49,987,000	\$226,159,000	\$129,139,000	
В.	Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	1.24%	2.19%	2.73%	
2	Parent Corporation Non-Operating Margin	2.18%	9.19%	3.09%	
3	Parent Corporation Total Margin	3.43%	11.38%	5.83%	
4	Income/(Loss) From Operations	\$18,142,000	\$43,533,000	\$60,576,000	
5	Total Operating Revenue	\$1,426,491,000	\$1,803,963,000	\$2,147,286,000	
6	Total Non-Operating Revenue	\$31,845,000	\$182,626,000	\$68,563,000	
7	Total Revenue	\$1,458,336,000	\$1,986,589,000	\$2,215,849,000	
8	Excess/(Deficiency) of Revenue Over Expenses	\$49,987,000	\$226,159,000	\$129,139,000	
C.	Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$376,306,000	\$491,087,000	\$509,479,000	
2	Parent Corporation Total Net Assets	\$709,149,000	\$847,957,000	\$911,913,000	
3	Parent Corporation Change in Total Net Assets	\$48,104,000	\$138,808,000	\$63,956,000	
4	Parent Corporation Change in Total Net Assets %	107.3%	19.6%	7.5%	

HARTFORD HEALTH CARE CORPORATION

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)		(3)	(4)	(5)
			ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010		FY 2011	FY 2012
D.	<u>Liquidity Measures Summary</u>				
1	Current Ratio		1.58	1.68	1.67
2	Total Current Assets		\$333,920,000	\$462,240,000	\$596,941,000
3	Total Current Liabilities		\$211,121,000	\$275,311,000	\$356,533,000
4	Days Cash on Hand		24	30	38
5	Cash and Cash Equivalents		\$90,044,000	\$139,631,000	\$206,896,000
6	Short Term Investments		0	0	0
7	Total Cash and Short Term Investments		\$90,044,000	\$139,631,000	\$206,896,000
8	Total Operating Expenses		\$1,408,349,000	\$1,760,430,000	\$2,086,710,000
9	Depreciation Expense		\$64,992,000	\$81,701,000	\$93,592,000
10	Operating Expenses less Depreciation Expense		\$1,343,357,000	\$1,678,729,000	\$1,993,118,000
11	Days Revenue in Patient Accounts Receivable		51	46	47
12	Net Patient Accounts Receivable	\$	177,076,000	\$ 235,816,000	\$ 272,907,000
13	Due From Third Party Payers		\$0	\$0	\$0
14	Due To Third Party Payers		\$2,610,000	\$34,065,000	\$29,931,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$	174,466,000	\$ 201,751,000	\$ 242,976,000
16	Total Net Patient Revenue		\$1,242,385,000	\$1,615,988,000	\$1,879,748,000
17	Average Payment Period		57	60	65
18	Total Current Liabilities		\$211,121,000	\$275,311,000	\$356,533,000
19	Total Operating Expenses		\$1,408,349,000	\$1,760,430,000	\$2,086,710,000
20	Depreciation Expense		\$64,992,000	\$81,701,000	\$93,592,000
21	Total Operating Expenses less Depreciation Expense		\$1,343,357,000	\$1,678,729,000	\$1,993,118,000

HARTFORD HEALTH CARE CORPORATION **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) **ACTUAL ACTUAL** ACTUAL LINE DESCRIPTION FY 2010 FY 2011 FY 2012 E. Solvency Measures Summary 47.4 39.9 37.8 **Equity Financing Ratio** \$847,957,000 Total Net Assets \$709,149,000 \$911,913,000 Total Assets \$1,495,702,000 \$2,123,561,000 \$2,413,698,000 4 Cash Flow to Total Debt Ratio 30.3 44.7 29.3 Excess/(Deficiency) of Revenues Over Expenses \$49,987,000 \$226,159,000 \$129,139,000 \$93,592,000 6 Depreciation Expense \$64,992,000 \$81,701,000 Excess of Revenues Over Expenses and Depreciation Expense \$114,979,000 \$307,860,000 \$222,731,000 Total Current Liabilities \$211,121,000 \$275,311,000 \$356,533,000 Total Long Term Debt \$168,532,000 \$413,327,000 \$403,991,000 10 Total Current Liabilities and Total Long Term Debt \$379,653,000 \$688,638,000 \$760,524,000 11 Long Term Debt to Capitalization Ratio 19.2 32.8 30.7 12 Total Long Term Debt \$168,532,000 \$413,327,000 \$403,991,000 13 Total Net Assets \$709,149,000 \$847,957,000 \$911,913,000

\$877,681,000

\$1,261,284,000

\$1,315,904,000

14 Total Long Term Debt and Total Net Assets

		HA	ARTFORD HOSPITA	AL				1
		TWELVE	MONTHS ACTUAL					
			FISCAL YEAR 201					
	REPORT 40	0 - HOSPITAL IN	PATIENT BED UTIL	IZATION BY DEF	PARTMENT			
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
1.7	(2)	(5)	DISCHARGES	3(5)	(4)	(5)	OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	<u>DAYS</u>	# PATIENT		BEDS (A)	<u>BEDS</u>	BEDS (A)	<u>BEDS</u>
1	Adult Medical/Surgical	149,954	29,859	29,816	436	514	94.2%	79.9%
2	ICU/CCU (Excludes Neonatal ICU)	24,992	534	0	69	74	99.2%	92.5%
3	Psychiatric: Ages 0 to 17	8,517	1,125	1.107	24	29	97.2%	80.5%
4	Psychiatric: Ages 1 to 17	29,779	2,990	2,942	82	94	99.5%	86.8%
	TOTAL PSYCHIATRIC	38,296	4,115	4,049	106	123	99.0%	85.3%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	11,022	3,557	3,762	31	43	97.4%	70.2%
7	Newborn	9,068	3,720	3,705	25	48	99.4%	51.8%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	224,264	37,531	37,627	642	754	95.7%	81.5%
	TOTAL INPATIENT BED UTILIZATION	233,332	41,251	41,332	667	802	95.8%	79.7%
	TOTAL INPATIENT REPORTED YEAR	233,332	41,251	41,332	667	802	95.8%	79.7%
	TOTAL INPATIENT PRIOR YEAR	223,555	40,674	40,703	640	796	95.7%	76.9%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	9,777	577	629	27	6	0.1%	2.8%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	4%	1%	2%	4%	1%	0%	4%
	Total Licensed Beds and Bassinets	867						
(A) T	his number may not exceed the number of avail	able beds for ea	ch department or in	n total.				
Note	: Total discharges do not include ICU/CCU patie	nts.						

		ARTFORD HOSPITAL MONTHS ACTUAL F	ILING		
	IWELVE	FISCAL YEAR 2012	ILING		
	REPORT 450 - HOSPITAL INPATIENT AN		ER SERVICES UTIL	IZATION AND FTE	S
(4)	(0)	(0)	(4)	(E)	(0)
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	<u>DIFFERENCE</u>
Α.	CT Scans (A)				
1	Inpatient Scans	19,547	22,372	2,825	14%
	Outpatient Scans (Excluding Emergency Department	·	,	,	
3	Scans) Emergency Department Scans	3,154 15,510	4,436 12,414	1,282 -3,096	41% -20%
4	Other Non-Hospital Providers' Scans (A)	15,510	12,414	-3,096	-20% 0%
•	Total CT Scans	38,211	39,222	1,011	3%
		·		·	
	MRI Scans (A)	2.507	4.040	4 445	400/
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	3,527	4,942	1,415	40%
2	Scans)	3,836	4,418	582	15%
3	Emergency Department Scans	379	445	66	17%
4	Other Non-Hospital Providers' Scans (A) Total MRI Scans	7,742	9, 805	2, 063	0% 27%
	Total link oddio	1,1 42	3,500	2,000	2170
C.	PET Scans (A)				
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	239	40	-199	-83%
2	Scans)	280	71	-209	-75%
3	Emergency Department Scans	31	2	-29	-94%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	550	113	-437	-79%
D.	PET/CT Scans (A)				
1	Inpatient Scans	289	55	-234	-81%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,000	1,162	162	16%
3	Emergency Department Scans	111	0	-111	-100%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	1,400	1,217	-183	-13%
	(A) If the Hospital is not the primary provider of the	se scans, the Hospita	I must obtain the fi	scal vear	
	volume of each of these types of scans from the	primary provider of	the scans.	,	
E .	Linear Accelerator Procedures Inpatient Procedures	1,279	1,401	122	10%
2	Outpatient Procedures	26,537	27,135	598	2%
	Total Linear Accelerator Procedures	27,816	28,536	720	3%
F.	Conding Cathotonination Proceedings				
<u>г.</u> 1	Cardiac Catheterization Procedures Inpatient Procedures	2,096	2,018	-78	-4%
					7%
2	Outpatient Procedures	1,048	1,121	73	1 /0
	Outpatient Procedures Total Cardiac Catheterization Procedures			73 -5	
2	Total Cardiac Catheterization Procedures	1,048	1,121		
2 G .	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures	1,048 3,144	1,121 3,139	-5	0%
2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures	1,048	1,121		-66%
G.	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures	1,048 3,144 1,247	1,121 3,139 427	-5 -820	-66% 3286%
G. 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures	1,048 3,144 1,247 22	1,121 3,139 427 745	-820 723	-66% 3286%
G. 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures	1,048 3,144 1,247 22	1,121 3,139 427 745	-820 723	-66% 3286% -8%
G . 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies	1,048 3,144 1,247 22 1,269	1,121 3,139 427 745 1,172 260 356	-820 723 -97 28 -119	-66% 3286% -8% 12% -25%
G. 1 2 H. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies	1,048 3,144 1,247 22 1,269	1,121 3,139 427 745 1,172	-820 723 -97	-66% 3286% -8% 12% -25%
G. 1 2 H. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies	1,048 3,144 1,247 22 1,269	1,121 3,139 427 745 1,172 260 356	-820 723 -97 28 -119	-66% 3286% -8% 12% -25%
G. 1 2 H. 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies Surgical Procedures Inpatient Surgical Procedures	1,048 3,144 1,247 22 1,269 232 475 707	1,121 3,139 427 745 1,172 260 356 616	-820 723 -97 28 -119 -91	-66% 3286% -8% -12% -25% -13%
2 G. 1 2 H. 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies Surgical Procedures Inpatient Surgical Procedures Outpatient Surgical Procedures	1,048 3,144 1,247 22 1,269 232 475 707	1,121 3,139 427 745 1,172 260 356 616	-820 723 -97 28 -119 -91 3,678 3,724	-66% 3286% -8% -12% -25% -13%
2 G. 1 2 H. 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies Surgical Procedures Inpatient Surgical Procedures	1,048 3,144 1,247 22 1,269 232 475 707	1,121 3,139 427 745 1,172 260 356 616	-820 723 -97 28 -119 -91	-66% 3286% -8% -12% -25% -13%

	TWELVE	MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2012			
	REPORT 450 - HOSPITAL INPATIENT AN		R SERVICES UTILI	ZATION AND FTES	}
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	<u>DIFFERENCE</u>	DIFFERENCE
	Inpatient Endoscopy Procedures	3,069	3,565	496	16%
2	Outpatient Endoscopy Procedures	11,099	11,766	667	6%
	Total Endoscopy Procedures	14,168	15,331	1,163	8%
K.	Hospital Emergency Room Visits				
	Emergency Room Visits: Treated and Admitted	17,014	20,588	3,574	21%
	Emergency Room Visits: Treated and Discharged	78,553	79,223	670	1%
	Total Emergency Room Visits	95,567	99,811	4,244	4%
	Total Emorgoney noom viene	00,001	33,311	.,	
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
	Dental Clinic Visits	12,963	13,681	718	6%
	Psychiatric Clinic Visits	10,206	13,739	3,533	35%
	Medical Clinic Visits	12,875	10,069	-2,806	-22%
	Specialty Clinic Visits	48,958	38,287	-10,671	-22%
	Total Hospital Clinic Visits	85,002	75,776	-9,226	-11%
	Others Heavited Outration (Walter				
	Other Hospital Outpatient Visits Rehabilitation (PT/OT/ST)	121,905	404 700	2.022	20/
	Cardiology	13,365	124,728 11,963	2,823 -1,402	2% -10%
	Chemotherapy	1,628	1,462	-1,402	-10%
	Gastroenterology	10,090	10,696	606	6%
5	Other Outpatient Visits	38,236	42,344	4.108	11%
5	Total Other Hospital Outpatient Visits	185,224	191,193	5,969	3%
	Total Other Hospital Outpatient Visits	105,224	191,193	5,969	37
	Harrisol Full Time Frankrich of Frankrich				
	Hospital Full Time Equivalent Employees Total Nursing FTFs	4 507 4	4 570 5	0.4	000
2	Total Nursing FTEs Total Physician FTEs	1,567.4 226.2	1,573.5 222.0	6.1 -4.2	0%
3					-2%
3	Total Non-Nursing and Non-Physician FTEs Total Hospital Full Time Equivalent Employees	4,044.7 5,838.3	4,238.0 6,033.5	193.3 195.2	5% 3%
	Total Hospital Full Tille Equivalent Employees	5,036.3	0,033.3	195.2	37

HARTFORD HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012** REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION (1) (2) (3) (4) (5) (6) ACTUAL ACTUAL **AMOUNT** % DIFFERENCE DIFFERENCE LINE DESCRIPTION FY 2011 FY 2012 A. **Outpatient Surgical Procedures** Eye Surgery Center 6,541 9,874 3,333 51% 2 Hartford Hospital 12,103 12,528 425 4% West Hartford Surgery Center 2,311 2,277 -34 -1% 3 Total Outpatient Surgical Procedures(A) 20,955 24,679 3,724 18% **Outpatient Endoscopy Procedures** В. Hartford Hospital 9,883 10,290 407 4% West Hartford Surgery Center 1,216 1,476 260 21% Total Outpatient Endoscopy Procedures(B) 11,099 11,766 667 6% **Outpatient Hospital Emergency Room Visits** C. 1 Hartford Hospital 78,553 79,223 670 1% Total Outpatient Hospital Emergency Room Visits 78,553 79,223 670 1% (A) Must agree with Total Outpatient Surgical Procedures on Report 450. (B) Must agree with Total Outpatient Endoscopy Procedures on Report 450. (C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
A.	MEDICARE				
	ALEDIO A DE INICA TIENT				
	MEDICARE INPATIENT INPATIENT ACCRUED CHARGES	#070 F70 004	\$700 00F 004	#F7 400 000	
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$672,572,624	\$730,035,304	\$57,462,680	99
	INPATIENT ACCROED PATMENTS (IP PMT) INPATIENT PAYMENTS / INPATIENT CHARGES	\$268,673,534 39.95%	\$283,217,747 38.80%	\$14,544,213 -1.15%	59 -39
_	DISCHARGES	15,795	16.556	761	-5%
	CASE MIX INDEX (CMI)	1.86130	1.89460	0.03330	29
	CASE MIX ADJUSTED DISCHARGES (CMAD)	29,399.23350	31,366.99760	1,967.76410	79
	INPATIENT ACCRUED PAYMENT / CMAD	\$9,138.79	\$9,029.16	(\$109.63)	-19
	PATIENT DAYS	103,335	110,148	6,813	79
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,600.02	\$2.571.25	(\$28.78)	-19
	AVERAGE LENGTH OF STAY	6.5	6.7	0.1	2%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$226,612,897	\$270,501,652	\$43,888,755	199
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$70,761,851	\$98,708,326	\$27,946,475	399
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.23%	36.49%	5.26%	179
14	OUTPATIENT CHARGES / INPATIENT CHARGES	33.69%	37.05%	3.36%	109
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,321.87987	6,134.53257	812.65270	159
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$13,296.40	\$16,090.60	\$2,794.20	21
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$899,185,521	\$1,000,536,956	\$101,351,435	119
18	TOTAL ACCRUED PAYMENTS	\$339,435,385	\$381,926,073	\$42,490,688	139
19	TOTAL ALLOWANCES	\$559,750,136	\$618,610,883	\$58,860,747	119

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)				
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$448,848,221	\$482,196,213	\$33,347,992	79
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$245,692,489	\$272,267,415	\$26,574,926	119
3	INPATIENT PAYMENTS / INPATIENT CHARGES	54.74%	56.46%	1.73%	3%
4	DISCHARGES	15,149	15,151	2	0%
5	CASE MIX INDEX (CMI)	1.42020	1.44350	0.02330	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	21,514.60980	21,870.46850	355.85870	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,419.80	\$12,449.09	\$1,029.29	99
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$2,281.00)	(\$3,419.93)	(\$1,138.92)	50%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$49,074,905)	(\$74,795,381)	(\$25,720,476)	529
10	PATIENT DAYS	67,703	70,824	3,121	5%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,628.97	\$3,844.28	\$215.31	69
12	AVERAGE LENGTH OF STAY	4.5	4.7	0.2	5%
	NON-GOVERNMENT OUTPATIENT				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$310,979,549	\$346,707,240	\$35,727,691	119
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$160,122,680	\$169,001,396	\$8,878,716	69
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	51.49%	48.74%	-2.75%	-5%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	69.28%	71.90%	2.62%	49
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,495.81789	10,893.82548	398.00759	49
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$15,255.86	\$15,513.50	\$257.65	29
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,959.45)	\$577.10	\$2,536.55	-129%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$20,566,072)	\$6,286,821	\$26,852,893	-1319
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$759,827,770	\$828,903,453	\$69,075,683	99
22	TOTAL ACCRUED PAYMENTS	\$405,815,169	\$441,268,811	\$35,453,642	99
23	TOTAL ALLOWANCES	\$354,012,601	\$387,634,642	\$33,622,041	99
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$69,640,978)	(\$68,508,560)	\$1,132,418	-20
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$702,077,657	\$755,770,258	\$53,692,601	89
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$379,231,248	\$414,620,694	\$35,389,446	99
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	, , , , , , , , , , , , , , , , , , , ,	, ,, ,,,,,	,,	-
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$322,846,409	\$341,149,564	\$18,303,155	69
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.98%	45.14%	-0.85%	

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$13,165,053	\$15,632,401	\$2,467,348	19%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$3,336,937	\$1,953,495	(\$1,383,442)	-41%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.35%	12.50%	-12.85%	-51%
4	DISCHARGES	359	453	94	26%
	CASE MIX INDEX (CMI)	1.39130	1.37220	(0.01910)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	499.47670	621.60660	122.12990	24%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,680.87	\$3,142.65	(\$3,538.21)	-53%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$4,738.93	\$9,306.43	\$4,567.50	96%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$2,457.93	\$5,886.51	\$3,428.58	139%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,227,678	\$3,659,093	\$2,431,415	198%
11	PATIENT DAYS	1,992	2,477	485	24%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,675.17	\$788.65	(\$886.52)	-53%
13	AVERAGE LENGTH OF STAY	5.5	5.5	(0.1)	-1%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$25,660,622	\$33,772,596	\$8,111,974	32%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,504,178	\$4,220,376	(\$2,283,802)	-35%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.35%	12.50%	-12.85%	-51%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	194.91%	216.04%	21.13%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	699.74373	978.67154	278.92781	40%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,295.09	\$4,312.35	(\$4,982.73)	-54%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,960.77	\$11,201.15	\$5,240.38	88%
21	MEDICARE - UNINSURED OP PMT / OPED	\$4,001.32	\$11,778.25	\$7,776.94	194%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,799,896	\$11,527,039	\$8,727,143	312%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$38,825,675	\$49,404,997	\$10,579,322	27%
24	TOTAL ACCRUED PAYMENTS	\$9,841,115	\$6,173,871	(\$3,667,244)	-37%
25	TOTAL ALLOWANCES	\$28,984,560	\$43,231,126	\$14,246,566	49%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,027,573	\$15,186,131	\$11,158,558	277%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
	DECORIDED		ACTUAL		
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
	INPATIENT ACCRUED CHARGES	\$247,961,574	\$263,906,213	\$15,944,639	6%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$75,495,802	\$77,348,496	\$1,852,694	2%
	INPATIENT PAYMENTS / INPATIENT CHARGES	30.45%	29.31%	-1.14%	-4%
	DISCHARGES	9.492	9.311	(181)	-4%
	CASE MIX INDEX (CMI)	1.20600	1.21880	0.01280	1%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	11,447.35200	11,348.24680	(99.10520)	-1%
	INPATIENT ACCRUED PAYMENT / CMAD	-	\$6,815.90	\$220.85	3%
	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,595.05	\$5,633.19	\$808.44	17%
,	MEDICARE - MEDICAID IP PMT / CMAD	\$4,824.75 \$2,543.75	\$2,213.27	(\$330.48)	-13%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,543.75	\$25,116,679	(\$4,002,509)	-14%
	PATIENT DAYS			(, , , ,	-14%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	50,852	50,907	55	2%
	AVERAGE LENGTH OF STAY	\$1,484.62	\$1,519.41	\$34.79	
13	AVERAGE LENGTH OF STAT	5.4	5.5	0.1	2%
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$131,648,815	\$151,822,082	\$20,173,267	15%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$38,661,995	\$39,715,207	\$1,053,212	3%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.37%	26.16%	-3.21%	-11%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	53.09%	57.53%	4.44%	8%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,039.53307	5,356.50673	316.97366	6%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,671.74	\$7,414.39	(\$257.36)	-3%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,584.11	\$8,099.12	\$515.00	7%
21	MEDICARE - MEDICAID OP PMT / OPED	\$5,624.66	\$8,676.22	\$3,051.56	54%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$28,345,660	\$46,474,214	\$18,128,555	64%
	MEDICALD TOTAL O (INDATIFNIT OUTDATIFNIT)				
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)	0070 5:	A 445 700	000 1177	
23	TOTAL ACCRUED CHARGES	\$379,610,389	\$415,728,295	\$36,117,906	10%
24	TOTAL ACCRUED PAYMENTS	\$114,157,797	\$117,063,703	\$2,905,906	3%
25	TOTAL ALLOWANCES	\$265,452,592	\$298,664,592	\$33,212,000	13%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$57,464,848	\$71,590,893	\$14,126,046	25%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
-	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
	DISCHARGES	-	-		0%
	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$11,419.80	\$12,449.09	\$1,029.29	9%
	MEDICARE - O.M.A. IP PMT / CMAD	\$9,138.79	\$9,029.16	(\$109.63)	-1%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	PATIENT DAYS	0	0	-	0%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$15,255.86	\$15,513.50	\$257.65	2%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$13,296.40	\$16,090.60	\$2,794.20	21%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
20	TOTAL STREET MEDICAL ACCIONATOR OF THE LIMIT ONDER ATMENT	\$0	φυ	φυ	

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPATMENT D	ATA. COMPARAT	IVE ANALIS	13	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL	ASSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$247,961,574	\$263,906,213	\$15,944,639	6%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$75,495,802	\$77,348,496	\$1,852,694	2%
	INPATIENT PAYMENTS / INPATIENT CHARGES	30.45%	29.31%	-1.14%	-4%
	DISCHARGES	9,492	9,311	(181)	-2%
5	CASE MIX INDEX (CMI)	1.20600	1.21880	0.01280	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	11.447.35200	11,348.24680	(99,10520)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,595.05	\$6,815.90	\$220.85	3%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,824.75	\$5,633.19	\$808.44	17%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,543.75	\$2,213.27	(\$330.48)	-13%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$29,119,188	\$25,116,679	(\$4,002,509)	-14%
11	PATIENT DAYS	50,852	50,907	55	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,484.62	\$1,519.41	\$34.79	2%
13	AVERAGE LENGTH OF STAY	5.4	5.5	0.1	2%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$131.648.815	\$151.822.082	\$20,173,267	15%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$38,661,995	\$39,715,207	\$1,053,212	3%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.37%	26.16%	-3.21%	-11%
	OUTPATIENT CHARGES / INPATIENT CHARGES	53.09%	57.53%	4.44%	8%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,039.53307	5,356.50673	316.97366	6%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,671.74	\$7,414.39	(\$257.36)	-3%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,584.11	\$8,099.12	\$515.00	7%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,624.66	\$8,676.22	\$3,051.56	54%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$28,345,660	\$46,474,214	\$18,128,555	64%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$379,610,389	\$415,728,295	\$36,117,906	10%
24	TOTAL ACCRUED PAYMENTS	\$114,157,797	\$117,063,703	\$2,905,906	3%
25	TOTAL ALLOWANCES	\$265,452,592	\$298,664,592	\$33,212,000	13%
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPATMENT DA				
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$8,638,310	\$7,034,673	(\$1,603,637)	-19%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$3,030,139	\$1,293,910	(\$1,736,229)	-57%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.08%	18.39%	-16.68%	-48%
4	DISCHARGES	238	233	(5)	-2%
5	CASE MIX INDEX (CMI)	1.17900	1.06060	(0.11840)	-10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	280.60200	247.11980	(33.48220)	-12%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,798.71	\$5,235.96	(\$5,562.75)	-52%
8	PATIENT DAYS	1,665	1,453	(212)	-13%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,819.90	\$890.51	(\$929.39)	-51%
10	AVERAGE LENGTH OF STAY	7.0	6.2	(0.8)	-11%
	CHAMPUS / TRICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,057,294	\$3,557,811	\$1,500,517	73%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$861,357	\$1,974,865	\$1,113,508	129%
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
13	TOTAL ACCRUED CHARGES	\$10,695,604	\$10,592,484	(\$103,120)	-1%
14	TOTAL ACCRUED PAYMENTS	\$3,891,496	\$3,268,775	(\$622,721)	-16%
15	TOTAL ALLOWANCES	\$6,804,108	\$7,323,709	\$519,601	8%
Н.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$121,645,764	\$164,600,638	\$42,954,874	35%
2	TOTAL OPERATING EXPENSES	\$963,927,041	\$1,046,001,610	\$82,074,569	9%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$18,246,408	\$23,839,114	\$5,592,706	31%
5	BAD DEBTS (CHARGES)	\$12,919,784	\$22,645,965	\$9,726,181	75%
6	UNCOMPENSATED CARE (CHARGES)	\$31,166,192	\$46,485,079	\$15,318,887	49%
7	COST OF UNCOMPENSATED CARE	\$12,918,784	\$19,140,856	\$6,222,072	48%
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)				
8	TOTAL ACCRUED CHARGES	\$379,610,389	\$415,728,295	\$36,117,906	10%
9	TOTAL ACCRUED PAYMENTS	\$114,157,797	\$117,063,703	\$2,905,906	3%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$157,353,344	\$171,181,715	\$13,828,370	9%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$43,195,547	\$54,118,012	\$10,922,464	25%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
II.	AGGREGATE DATA				
Α.	TOTALS - ALL PAYERS				
1	TOTAL INPATIENT CHARGES	\$1,378,020,729	\$1,483,172,403	\$105,151,674	8%
2	TOTAL INPATIENT PAYMENTS	\$592.891.964	\$634,127,568	\$41,235,604	7%
3	TOTAL INPATIENT PAYMENTS / CHARGES	43.02%	42.75%	-0.27%	-1%
4	TOTAL DISCHARGES	40,674	41,251	577	1%
5	TOTAL CASE MIX INDEX	1.54009	1.57167	0.03157	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	62.641.79730	64.832.83270	2.191.03540	3%
7	TOTAL OUTPATIENT CHARGES	\$671,298,555	\$772,588,785	\$101,290,230	15%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	48.71%	52.09%	3,38%	7%
9	TOTAL OUTPATIENT PAYMENTS	\$270,407,883	\$309,399,794	\$38,991,911	14%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.28%	40.05%	-0.23%	-1%
11	TOTAL CHARGES	\$2,049,319,284	\$2,255,761,188	\$206,441,904	10%
12	TOTAL PAYMENTS	\$863,299,847	\$943.527.362	\$80,227,515	9%
13	TOTAL PAYMENTS / TOTAL CHARGES	42.13%	41.83%	-0.30%	-1%
	PATIENT DAYS	223.555	233.332	9.777	4%
				2,	
B.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$929,172,508	\$1,000,976,190	\$71,803,682	8%
2	INPATIENT PAYMENTS	\$347,199,475	\$361,860,153	\$14,660,678	4%
3	GOVT. INPATIENT PAYMENTS / CHARGES	37.37%	36.15%	-1.22%	-3%
4	DISCHARGES	25.525	26.100	575	2%
5	CASE MIX INDEX	1.61125	1.64607	0.03482	2%
6	CASE MIX ADJUSTED DISCHARGES	41,127.18750	42,962.36420	1,835.17670	4%
7	OUTPATIENT CHARGES	\$360,319,006	\$425,881,545	\$65,562,539	18%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	38.78%	42.55%	3.77%	10%
9	OUTPATIENT PAYMENTS	\$110,285,203	\$140,398,398	\$30,113,195	27%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.61%	32.97%	2.36%	8%
11	TOTAL CHARGES	\$1,289,491,514	\$1,426,857,735	\$137,366,221	11%
12	TOTAL PAYMENTS	\$457,484,678	\$502,258,551	\$44,773,873	10%
13	TOTAL PAYMENTS / CHARGES	35.48%	35.20%	-0.28%	-1%
14	PATIENT DAYS	155,852	162,508	6,656	4%
15	TOTAL GOVERNMENT DEDUCTIONS	\$832,006,836	\$924,599,184	\$92,592,348	11%
C.	AVERAGE LENGTH OF STAY				
1	MEDICARE	6.5	6.7	0.1	2%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.5	4.7	0.2	5%
3	UNINSURED	5.5	5.5	(0.1)	-1%
4	MEDICAID	5.4	5.5	0.1	2%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	7.0	6.2	(0.8)	-11%
7	TOTAL AVERAGE LENGTH OF STAY	5.5	5.7	0.2	3%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPAYMENT DAT	A. COMPARA	IVE ANAL 13	13	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
	DECORAL FICK	112011	1 1 2012	DITTERCENCE	DITTERCENCE
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$2,049,319,284	\$2,255,761,188	\$206,441,904	10%
2	TOTAL GOVERNMENT DEDUCTIONS	\$832,006,836	\$924,599,184	\$92,592,348	11%
3	UNCOMPENSATED CARE	\$31,166,192	\$46,485,079	\$15,318,887	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$322,846,409	\$341,149,564	\$18,303,155	6%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$13,830,886	\$14,687,365	\$856,479	6%
6	TOTAL ADJUSTMENTS	\$1,199,850,323	\$1,326,921,192	\$127,070,869	11%
7	TOTAL ACCRUED PAYMENTS	\$849,468,961	\$928,839,996	\$79,371,035	9%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$849,468,961	\$928,839,996	\$79,371,035	9%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4145127446	0.4117634442	(0.0027493004)	-1%
11	COST OF UNCOMPENSATED CARE	\$12,918,784	\$19,140,856	\$6,222,072	48%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$43,195,547	\$54,118,012	\$10,922,464	25%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
	TOTAL COST OF UNCOMPENSATED CARE AND	7.	**	**	
	MEDICAL ASSISTANCE UNDERPAYMENT	\$56,114,331	\$73,258,868	\$17,144,537	31%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$28,345,660	\$46,474,214	\$18,128,555	64%
	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,027,573	\$15,186,131	\$11,158,558	277%
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$32,373,233	\$61,660,346	\$29,287,113	90%
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600				
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$24,733,408	\$25,971,013	\$1,237,605	5.00%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$9,340,569)	(\$16,894,306)	(\$7,553,737)	80.87%
-	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$853,959,278	\$926,633,051	\$72,673,773	8.51%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$2,049,319,284	\$2,255,761,188	\$206,441,904	10.07%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$2,112,198	\$1,554,984	(\$557,214)	-26.38%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$33,278,390	\$48,040,065	\$14,761,675	44.36%

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	HARTFORD HOSPITAL		I.	
	TWELVE MONTHS ACTUAL FILING	i		
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAY	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA	١		
L.,		(0)	(0)	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	<u>DIFFERENCE</u>
I.	ACCRUED CHARGES AND PAYMENTS			
Α.	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$448,848,221	\$482,196,213	\$33,347,992
	MEDICARE	\$672,572,624	730,035,304	\$57,462,680
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$247,961,574 \$247,961,574	263,906,213 263,906,213	\$15,944,639 \$15,944,639
	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
	CHAMPUS / TRICARE	\$8,638,310	7,034,673	(\$1,603,637)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$13,165,053 \$929,172,508	15,632,401 \$1,000,976,190	\$2,467,348 \$71,803,682
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$1,378,020,729	\$1,483,172,403	\$105,151,674
		. , . , . , . , ,	. , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$240.070.E40	¢246 707 040	\$25 7 27 624
	MEDICARE	\$310,979,549 \$226,612,897	\$346,707,240 270,501,652	\$35,727,691 \$43,888,755
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$131,648,815	151,822,082	\$20,173,267
	MEDICALD OTHER MEDICAL ASSISTANCE	\$131,648,815	151,822,082	\$20,173,267
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0 \$2,057,294	0 3,557,811	\$0 \$1,500,517
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$25,660,622	33,772,596	\$8,111,974
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$360,319,006	\$425,881,545	\$65,562,539
-	TOTAL OUTPATIENT CHARGES	\$671,298,555	\$772,588,785	\$101,290,230
C.	TOTAL ACCRUED CHARGES			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$759,827,770	\$828,903,453	\$69,075,683
	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$899,185,521	\$1,000,536,956	\$101,351,435
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$379,610,389 \$379,610,389	\$415,728,295 \$415,728,295	\$36,117,906 \$36,117,906
	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
	TOTAL CHAMPUS / TRICARE	\$10,695,604	\$10,592,484	(\$103,120)
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$38,825,675 \$1,289,491,514	\$49,404,997 \$1,426,857,735	\$10,579,322 \$137,366,221
	TOTAL CHARGES	\$2,049,319,284	\$2,255,761,188	\$206,441,904
D.	INPATIENT ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$245,692,489	\$272,267,415	\$26,574,926
2	MEDICARE	\$268,673,534	283,217,747	\$14,544,213
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$75,495,802	77,348,496 77,348,496	\$1,852,694
	OTHER MEDICAL ASSISTANCE	\$75,495,802 \$0	77,346,496	\$1,852,694 \$0
	CHAMPUS / TRICARE	\$3,030,139	1,293,910	(\$1,736,229)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,336,937	1,953,495	(\$1,383,442)
	TOTAL INPATIENT GOVERNMENT PAYMENTS TOTAL INPATIENT PAYMENTS	\$347,199,475 \$592,891,964	\$361,860,153 \$634,127,568	\$14,660,678 \$41,235,604
		\	400 1,121,000	V 11,200,001
	OUTPATIENT ACCRUED PAYMENTS NON COVERNMENT (INCLUDING SELE BAY (LININGLIBED)	\$400.400.000	¢400 004 000	#0.070.74 °
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$160,122,680 \$70,761,851	\$169,001,396 98,708,326	\$8,878,716 \$27,946,475
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$38,661,995	39,715,207	\$1,053,212
	MEDICAID	\$38,661,995	39,715,207	\$1,053,212
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0 \$861,357	0 1,974,865	\$0 \$1,113,508
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,504,178	4,220,376	(\$2,283,802)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$110,285,203	\$140,398,398	\$30,113,195
<u> </u>	TOTAL OUTPATIENT PAYMENTS	\$270,407,883	\$309,399,794	\$38,991,911
F.	TOTAL ACCRUED PAYMENTS			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$405,815,169	\$441,268,811	\$35,453,642
3	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$339,435,385 \$114,157,797	\$381,926,073 \$117,063,703	\$42,490,688 \$2,905,906
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) TOTAL MEDICAID	\$114,157,797 \$114,157,797	\$117,063,703 \$117,063,703	\$2,905,906 \$2,905,906
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
	TOTAL CHAMPUS / TRICARE	\$3,891,496	\$3,268,775	(\$622,721)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT PAYMENTS	\$9,841,115 \$457,484,678	\$6,173,871 \$502,258,551	(\$3,667,244) \$44,773,873
	TOTAL PAYMENTS	\$863,299,847	\$943,527,362	\$80,227,515
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	HARTFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
		ENT LIMIT AND		
	REPORT 550 - CALCULATION OF DSH UPPER PAYMING THE PROPERTY OF THE PROPERTY OF THE PAYMING	ENI LIMII AND		
	BASELINE UNDERPAYMENT DATA			
		(2)	(1)	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
IINE	DESCRIPTION	FY 2011	FY 2012	AMOUNT DIFFERENCE
LIIVL	<u>DESCRIPTION</u>	112011	112012	DITTERCENCE
П	PAYER MIX			
11.	TATEL MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21.90%	21.38%	-0.53%
	MEDICARE CONTINUE (NO. LIPTO OT LIPTO MEDICAL ACCIOTANCE)	32.82%	32.36%	-0.46%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.10%	11.70%	-0.40%
	MEDICAID OTHER MEDICAL ASSISTANCE	12.10%	11.70%	-0.40%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00% 0.42%	0.00% 0.31%	0.00% -0.11%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%	0.69%	0.05%
<u> </u>	TOTAL INPATIENT GOVERNMENT PAYER MIX	45.34%	44.37%	-0.97%
	TOTAL INPATIENT PAYER MIX	67.24%	65.75%	-1.49%
B.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.17%	15.37%	0.20%
	MEDICARE (NO. 10.00)	11.06%	11.99%	0.93%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.42%	6.73%	0.31%
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	6.42% 0.00%	6.73% 0.00%	0.31% 0.00%
	CHAMPUS / TRICARE	0.10%	0.00%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.25%	1.50%	0.25%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	17.58%	18.88%	1.30%
	TOTAL OUTPATIENT PAYER MIX	32.76%	34.25%	1.49%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
4	NON COVERNMENT (INCLLIDING SELE DAY / LININGLIDED)	20.400/	28.86%	0.400/
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	28.46% 31.12%	30.02%	0.40% -1.10%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.75%	8.20%	-0.55%
	MEDICAID	8.75%	8.20%	-0.55%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	0.35%	0.14%	-0.21%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.39%	0.21%	-0.18%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	40.22%	38.35%	-1.87%
	TOTAL INPATIENT PAYER MIX	68.68%	67.21%	-1.47%
<u> </u>	CUITRATIENT DAVER MIX DACED ON ACCOURT DAVMENTO			
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.55%	17.91%	-0.64%
	MEDICARE	8.20%	10.46%	2.26%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.48%	4.21%	-0.27%
4	MEDICAID	4.48%	4.21%	-0.27%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.10%	0.21%	0.11%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.75%	0.45%	-0.31%
<u> </u>	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	12.77%	14.88%	2.11%
	TOTAL OUTPATIENT PAYER MIX	31.32%	32.79%	1.47%
 	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	400.000/	400.000/	0.000/
—	TOTAL FATER WIN DASED ON ACCRUED FATIMENTS	100.00%	100.00%	0.00%

	HARTEORR HOCRITAL			
	HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
		(0)	(1)	(=)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE
III	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
1111.	DISCHARGES, PATIENT DATS, ALOS, CASE WIIX INDEX AND OTHER REGUIRE	DAIA		
Α.	DISCHARGES_			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,149	15,151	2
2	MEDICARE	15,795	16,556	761
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	9,492	9,311	(181)
_	OTHER MEDICAL ASSISTANCE	9,492	9,311 0	(181)
6	CHAMPUS / TRICARE	238	233	(5)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	359 25,525	453 26,100	94 575
	TOTAL DISCHARGES	40,674	41,251	577
	DATIENT DAVE			
В.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	67,703	70,824	3,121
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	103,335 50,852	110,148 50,907	6,813 55
_	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	50,852	50,907	55
5	OTHER MEDICAL ASSISTANCE	0	0	-
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,665 1,992	1,453 2,477	(212) 485
<u> </u>	TOTAL GOVERNMENT PATIENT DAYS	155,852	162,508	6,656
	TOTAL PATIENT DAYS	223,555	233,332	9,777
C.	AVERAGE LENGTH OF STAY (ALOS)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.5	4.7	0.2
_	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.5 5.4	6.7 5.5	0.1
4	MEDICAID	5.4	5.5	0.1
	OTHER MEDICAL ASSISTANCE	0.0	0.0	- (0.0)
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	7.0 5.5	6.2 5.5	(0.8) (0.1)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	6.1	6.2	0.1
	TOTAL AVERAGE LENGTH OF STAY	5.5	5.7	0.2
D.	CASE MIX INDEX			
L_	NON COVERNMENT (INCLUDING OFFER DAY (TININGLIDED)	1,42020	4 44050	0.00000
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	1.42020 1.86130		0.02330 0.03330
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.20600	1.21880	0.01280
	MEDICAID	1.20600	1.21880	0.01280
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00000 1.17900	0.00000 1.06060	0.00000 (0.11840)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.39130	1.37220	(0.01910)
	TOTAL GOVERNMENT CASE MIX INDEX	1.61125		0.03482
	TOTAL CASE MIX INDEX	1.54009	1.57167	0.03157
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$702,077,657	\$755,770,258	\$53,692,601
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$379,231,248	\$414,620,694	\$35,389,446
<u> </u>	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$322,846,409	\$341,149,564	\$18,303,155
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.98%	45.14%	-0.85%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$24,733,408 \$13,830,886	\$25,971,013 \$14,687,365	\$1,237,605 \$856,479
6 7	EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	\$13,830,886 \$0	\$14,687,365 \$0	φοσο,479
	ADJUSTMENT-OHCA INPUT)	+0	,,,	\$0
	CHARITY CARE	\$18,246,408	\$23,839,114	\$5,592,706
	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$12,919,784 \$31,166,192	\$22,645,965 \$46,485,079	\$9,726,181 \$15,318,887
10	TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE	\$31,166,192	\$46,485,079 \$755,770,258	\$53,692,601
	TOTAL OPERATING EXPENSES	\$963,927,041	\$1,046,001,610	\$82,074,569
1				

	HARTFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	IENT I IMIT AND		
	BASELINE UNDERPAYMENT DATA	LINI LIMIT AND		
	BACLEINE ONDERN ATMENT BATA			
(1)	(2)	(3)	(4)	(5)
		AOTUAL	ACTUAL	
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL FY 2012	AMOUNT <u>DIFFERENCE</u>
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21,514.60980	21,870.46850	355.85870
	MEDICARE	29,399.23350	31,366.99760	1,967.76410
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,447.35200	11,348.24680	(99.10520
	MEDICAID	11,447.35200	11,348.24680	(99.10520
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	280.60200 499.47670	247.11980 621.60660	(33.48220
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	41,127.18750	42,962.36420	1.835.17670
	TOTAL CASE MIX ADJUSTED DISCHARGES	62,641.79730	64,832.83270	2,191.03540
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,495.81789	10,893.82548	398.0075
	MEDICARE	5,321.87987	6,134.53257	812.6527
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,039.53307	5,356.50673	316.9736
	MEDICAID	5,039.53307	5,356.50673	316.9736
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.0000
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	56.68192 699.74373	117.84058 978.67154	61.1586 278.9278
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	10,418.09486	11,608.87988	1,190.7850
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	20,913.91274	22,502.70537	1,588.7926
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,419.80	\$12,449.09	\$1,029.29
	MEDICARE	\$9,138.79	\$9,029.16	(\$109.63
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,595.05	\$6,815.90	\$220.8
	MEDICAID	\$6,595.05	\$6,815.90	\$220.85
5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0.00	\$0.00	\$0.00
<u>6</u> 7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,798.71 \$6,680.87	\$5,235.96 \$3,142.65	(\$5,562.75 (\$3,538.2°
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,442.09	\$8,422.72	(\$3,536.21 (\$19.37
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$9,464.80	\$9,780.96	\$316.17
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON COVEDNMENT (INCLLIDING SELE DAY / LININGLIDED)	\$15,255.86	\$15,513.50	\$257.65
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$13,296.40	\$16,090.60	\$2.794.20
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,671.74	\$7,414.39	(\$257.36
4	MEDICAID	\$7,671.74	\$7,414.39	(\$257.36
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$15,196.33	\$16,758.79	\$1,562.46
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,295.09	\$4,312.35	(\$4,982.73
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$10,585.93 \$12,929.57	\$12,094.05 \$13,749.45	\$1,508.12 \$819.88
	ITOTAL COTT ATTENT FATMENT FEN COTFATIENT EQUIVALENT DISCHARGE	ψ12,323.J <i>1</i>	ψιο,143.43	φυ i 3.00

	HARTFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
- 1	MEDICAID	\$20 24E 660	\$46,474,214	¢10 100 EE
2	OTHER MEDICAL ASSISTANCE	\$28,345,660 \$0	\$46,474,214 \$0	\$18,128,555 \$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,027,573	\$15,186,131	\$11,158,558
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$32,373,233	\$61,660,346	\$29,287,113
		ψ32,373,233	ψ01,000,040	Ψ23,207,110
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	LOGY)		
	The state of the s			
1	TOTAL CHARGES	\$2,049,319,284	\$2,255,761,188	\$206,441,904
2	TOTAL GOVERNMENT DEDUCTIONS	\$832,006,836	\$924,599,184	\$92,592,348
3	UNCOMPENSATED CARE	\$31,166,192	\$46,485,079	\$15,318,88
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$322,846,409	\$341,149,564	\$18,303,15
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$13,830,886	\$14,687,365	\$856,479
6	TOTAL ADJUSTMENTS	\$1,199,850,323	\$1,326,921,192	\$127,070,869
7	TOTAL ACCRUED PAYMENTS	\$849,468,961	\$928,839,996	\$79,371,035
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0 \$849,468,961	\$0 \$928,839,996	\$0 \$79,371,03
9 10	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS RATIO OF NET REVENUE TO TOTAL CHARGES	0.4145127446	0.4117634442	(0.0027493004
11	COST OF UNCOMPENSATED CARE	\$12,918,784	\$19,140,856	\$6,222,072
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$43,195,547	\$54,118,012	\$10,922,464
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$(
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	4 0	Ψ	Ψ.
		\$56,114,331	\$73,258,868	\$17,144,537
VII.	RATIOS			
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	54.74%	56.46%	1.739
2	MEDICARE	39.95%	38.80%	-1.159
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	30.45%	29.31%	-1.149
4	MEDICAID	30.45%	29.31%	-1.149
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00
6	CHAMPUS / TRICARE	35.08%	18.39%	-16.689
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	25.35%	12.50%	-12.85
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			_
		37.37%	36.15%	-1.22
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	43.02%	42.75%	-0.27
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	51.49%	48.74%	-2.75
2	MEDICARE	31.23%	36.49%	5.26
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	29.37%	26.16%	-3.21
4	MEDICAID	29.37%	26.16%	-3.21
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00
6	CHAMPUS / TRICARE	41.87%	55.51%	13.64
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	25.35%	12.50%	-12.85
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
		30.61%	32.97%	2.36
		30.01%	32.31 /0	
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	40.28%	40.05%	-0.23

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	HARTFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	AMOUNT <u>DIFFERENCE</u>
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	ATIONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENT	<u>s</u>		
1	TOTAL ACCRUED PAYMENTS	\$863,299,847	\$943,527,362	\$80,227,515
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	φουσ,299,047	ψ 34 3,321,302	\$0,227,515
	(OHCA INPUT)	\$0	\$0	·
	OHCA DEFINED NET REVENUE	\$863,299,847	\$943,527,362	\$80,227,515
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$9.340.569)	(\$16,894,306)	(\$7,553,737
	CALCULATED NET REVENUE	\$853,959,278	\$926,633,056	\$72,673,778
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$853,959,278	\$926,633,051	\$72,673,773
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$5	\$5
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	\$2,049,319,284	\$2,255,761,188	\$206,441,904
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$2,049,319,284	\$2,255,761,188	\$206,441,904
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$2,049,319,284	\$2,255,761,188	\$206,441,904
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	TS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$31,166,192	\$46,485,079	\$15,318,887
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$2,112,198	\$1,554,984	(\$557,214
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$33,278,390	\$48,040,063	\$14,761,673
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$33,278,390	\$48,040,065	\$14,761,675
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$2)	(\$2

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012** REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND **BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES** (1) (2)(3) **ACTUAL** FY 2012 LINE DESCRIPTION ACCRUED CHARGES AND PAYMENTS **INPATIENT ACCRUED CHARGES** A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1 \$482,196,213 730,035,304 **MEDICARE** MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 263,906,213 **MEDICAID** 263,906,213 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 7,034,673 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 15,632,401 TOTAL INPATIENT GOVERNMENT CHARGES \$1,000,976,190 TOTAL INPATIENT CHARGES \$1,483,172,403 В. **OUTPATIENT ACCRUED CHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$346,707,240 **MEDICARE** 270,501,652 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 151,822,082 **MEDICAID** 4 151,822,082 OTHER MEDICAL ASSISTANCE 5 Ω CHAMPUS / TRICARE 3,557,811 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 33.772.596 TOTAL OUTPATIENT GOVERNMENT CHARGES \$425,881,545 TOTAL OUTPATIENT CHARGES \$772,588,785 C. TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED) 1 \$828,903,453 TOTAL GOVERNMENT ACCRUED CHARGES 2 1,426,857,735 **TOTAL ACCRUED CHARGES** \$2,255,761,188 INPATIENT ACCRUED PAYMENTS D. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$272,267,415 283,217,747 MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 77,348,496 **MEDICAID** 77,348,496 OTHER MEDICAL ASSISTANCE 5 0 6 CHAMPUS / TRICARE 1,293,910 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 1,953,495 TOTAL INPATIENT GOVERNMENT PAYMENTS \$361,860,153 **TOTAL INPATIENT PAYMENTS** \$634,127,568 **OUTPATIENT ACCRUED PAYMENTS** E NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$169,001,396 2 **MEDICARE** 98,708,326 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 39,715,207 **MEDICAID** 39,715,207 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 6 1,974,865 UNINSURED (INCLUDED IN NON-GOVERNMENT) 4,220,376 7 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$140,398,398 TOTAL OUTPATIENT PAYMENTS \$309,399,794 TOTAL ACCRUED PAYMENTS F. TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED) \$441,268,811 2 TOTAL GOVERNMENT ACCRUED PAYMENTS 502,258,551 TOTAL ACCRUED PAYMENTS \$943,527,362

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012** REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (1) (2)(3) **ACTUAL** FY 2012 LINE **DESCRIPTION** II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA A. **ACCRUED DISCHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 15,151 1 **MEDICARE** 16,556 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 9,311 **MEDICAID** 9,311 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 233 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 453 **TOTAL GOVERNMENT DISCHARGES** 26,100 TOTAL DISCHARGES 41,251 В. CASE MIX INDEX NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.44350 1.89460 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 1.21880 3 **MEDICAID** 1.21880 4 OTHER MEDICAL ASSISTANCE 0.00000 5 CHAMPUS / TRICARE 1.06060 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 1.37220 **TOTAL GOVERNMENT CASE MIX INDEX** 1.64607 TOTAL CASE MIX INDEX 1.57167 OTHER REQUIRED DATA C. TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 1 \$755,770,258 ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 2 \$414,620,694 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 3 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$341,149,564 TOTAL ACTUAL DISCOUNT PERCENTAGE 45.14% 4 5 EMPLOYEE SELF INSURANCE GROSS REVENUE \$25,971,013 6 EMPLOYEE SELF INSURANCE ALLOWANCE \$14,687,365 7 UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT) \$0 CHARITY CARE 8 \$23,839,114 9 **BAD DEBTS** \$22,645,965 TOTAL UNCOMPENSATED CARE 10 \$46,485,079 TOTAL OTHER OPERATING REVENUE 11 \$164,600,638 TOTAL OPERATING EXPENSES 12 \$1,046,001,610

	HARTFORD HOSPITAL		
	TWELVE MONTHS ACTUAL FILING		
	FISCAL YEAR 2012		
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)	
		ACTUAL	
INE	DESCRIPTION	FY 2012	
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
Α. Ι	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
4	TOTAL ACCOUNT DAYMENTO	\$0.40 F07 000	
1 2	TOTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$943,527,362 \$0	
	OHCA DEFINED NET REVENUE	\$943,527,362	
ľ	OTION DELINED HET REVERGE	ψ3+3,321,30	
3 1	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$16,894,30	
	CALCULATED NET REVENUE	\$926,633,050	
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$926,633,05	
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$920,033,05	
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)		
В. ј	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1 (OHCA DEFINED GROSS REVENUE	\$2,255,761,18	
2 l	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$(
	CALCULATED GROSS REVENUE	\$2,255,761,18	
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$2,255,761,188	
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$2,255,761,16	
,	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$	
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$46,485,07	
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,554,98	
- '	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$48,040,063	
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$48,040,06	
,	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$	

HARTFORD HOSPITAL **TWELVE MONTHS ACTUAL FILING** FISCAL YEAR 2012 **REPORT 650 - HOSPITAL UNCOMPENSATED CARE** (1) (2) (3) (4) (5) (6)ACTUAL **ACTUAL AMOUNT** % LINE DESCRIPTION FY 2011 FY 2012 DIFFERENCE DIFFERENCE Hospital Charity Care (from HRS Report 500) A. Number of Applicants 9,496 8,384 (1,112)-12% 2 Number of Approved Applicants -12% 9,021 7,965 (1,056)**Total Charges (A)** \$18,246,408 \$23,839,114 \$5,592,706 31% 3 4 **Average Charges** \$2,023 \$2,993 \$970 48% Ratio of Cost to Charges (RCC) 5 0.453004 0.444009 (0.008995)-2% **Total Cost** \$8,265,696 \$10,584,781 \$2,319,085 28% 6 **Average Cost** 7 \$916 \$1,329 \$413 45% Charity Care - Inpatient Charges \$8,251,032 \$11,131,667 \$2,880,635 35% 8 Charity Care - Outpatient Charges (Excludes ED Charges) 9 5,446,471 8,954,625 3,508,154 64% 10 Charity Care - Emergency Department Charges 4,548,905 (796,083) -18% 3,752,822 11 **Total Charges (A)** \$18,246,408 \$23,839,114 \$5,592,706 31% Charity Care - Number of Patient Days 1,939 12 1,879 -3% (60)13 Charity Care - Number of Discharges (37)345 308 -11% 14 Charity Care - Number of Outpatient ED Visits 5,488 3,873 (1,615)-29% 15 Charity Care - Number of Outpatient Visits (Excludes ED Visits) 8,946 9,724 778 9% Hospital Bad Debts (from HRS Report 500) В. **Bad Debts - Inpatient Services** \$4,826,727 \$7,565,598 \$2,738,871 57% Bad Debts - Outpatient Services (Excludes ED Bad Debts) 9,349,827 2 5,017,695 4,332,132 86% 3 Bad Debts - Emergency Department 3.075.362 5.730.540 2.655.178 86% 4 Total Bad Debts (A) \$12,919,784 \$22,645,965 \$9,726,181 75% Hospital Uncompensated Care (from HRS Report 500) C. Charity Care (A) 31% 1 \$18,246,408 \$23,839,114 \$5,592,706 2 Bad Debts (A) 12,919,784 22,645,965 9,726,181 75% **Total Uncompensated Care (A)** 3 \$31,166,192 \$46,485,079 \$15,318,887 49% 4 **Uncompensated Care - Inpatient Services** 43% \$13,077,759 \$18,697,265 \$5,619,506 5 Uncompensated Care - Outpatient Services (Excludes ED Unc. Care) 10,464,166 18,304,452 7,840,286 75% 7,624,267 Uncompensated Care - Emergency Department 9,483,362 1,859,095 24% 6 **Total Uncompensated Care (A)** \$31,166,192 \$46,485,079 \$15,318,887 49% (A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

	ERENCE 89
LINE DESCRIPTION NON-GOVERNMENT NON-GOVERNMENT DIFFERENCE DIFF	ERENCE
	ERENCE
	EDENIA
ACTUAL TOTAL ACTUAL TOTAL AMOUNT	%
(1) (2) (3) (4) (5) FY 2011 FY 2012	(6)
	(0)

HARTFORD HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) ACTUAL **ACTUAL** ACTUAL LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 **Gross and Net Revenue** A. Inpatient Gross Revenue \$1,323,691,385 \$1,378,020,729 \$1,483,172,403 1 2 Outpatient Gross Revenue \$578,027,738 \$671,298,555 \$772,588,785 3 Total Gross Patient Revenue \$1,901,719,123 \$2,049,319,284 \$2,255,761,188 Net Patient Revenue \$794,806,049 \$853,959,278 \$926,633,051 В. **Total Operating Expenses** 1 Total Operating Expense \$920,001,155 \$963,927,041 \$1,046,001,610 C. **Utilization Statistics** Patient Days 220,114 223,555 233,332 41,251 2 Discharges 41,265 40,674 3 Average Length of Stay 5.3 5.5 5.7 316,233 332,459 Equivalent (Adjusted) Patient Days (EPD) 354,875 4 Equivalent (Adjusted) Discharges (ED) 59,285 60,488 62,739 0 **Case Mix Statistics** D. 1.48651 1.54009 1.57167 1 Case Mix Index 327,203 344,296 366,720 2 Case Mix Adjusted Patient Days (CMAPD) 64,833 3 Case Mix Adjusted Discharges (CMAD) 61,341 62,642 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 470,085 512,018 557,746 Case Mix Adjusted Equivalent Discharges (CMAED) 88,127 93,158 98,604 5 E. **Gross Revenue Per Statistic** 1 Total Gross Revenue per Patient Day \$8,640 \$9,167 \$9,668 2 Total Gross Revenue per Discharge \$46,086 \$50,384 \$54,684 Total Gross Revenue per EPD \$6,014 \$6,356 \$6,164 3 \$32,078 4 Total Gross Revenue per ED \$33,880 \$35,955 Total Gross Revenue per CMAEPD \$4,045 \$4,002 \$4,044 Total Gross Revenue per CMAED \$21,579 \$21,998 \$22,877 6

\$4,186

\$22,328

\$4,145

\$22,782

\$4,179

\$23,640

7

Inpatient Gross Revenue per EPD

Inpatient Gross Revenue per ED

HARTFORD HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE

(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2010	FY 2011	FY 2012
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$3,611	\$3,820	\$3,971
2	Net Patient Revenue per Discharge	\$19,261	\$20,995	\$22,463
3	Net Patient Revenue per EPD	\$2,513	\$2,569	\$2,611
4	Net Patient Revenue per ED	\$13,407	\$14,118	\$14,770
5	Net Patient Revenue per CMAEPD	\$1,691	\$1,668	\$1,661
6	Net Patient Revenue per CMAED	\$9,019	\$9,167	\$9,397
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$4,180	\$4,312	\$4,483
2	Total Operating Expense per Discharge	\$22,295	\$23,699	\$25,357
3	Total Operating Expense per EPD	\$2,909	\$2,899	\$2,948
4	Total Operating Expense per ED	\$15,518	\$15,936	\$16,672
5	Total Operating Expense per CMAEPD	\$1,957	\$1,883	\$1,875
6	Total Operating Expense per CMAED	\$10,439	\$10,347	\$10,608
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$133,233,307	\$140,350,779	\$140,913,540
2	Nursing Fringe Benefits Expense	\$33,209,967	\$41,738,240	\$47,150,448
3	Total Nursing Salary and Fringe Benefits Expense	\$166,443,274	\$182,089,019	\$188,063,988
l.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$38,244,961	\$42,066,899	\$40,875,101
2	Physician Fringe Benefits Expense	\$10,063,626	\$12,510,072	\$13,677,034
3	Total Physician Salary and Fringe Benefits Expense	\$48,308,587	\$54,576,971	\$54,552,135
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$227,027,658	\$250,921,753	\$271,163,840
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$57,362,671	\$74,620,408	\$90,732,918
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$284,390,329	\$325,542,161	\$361,896,758
K.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$398,505,926	\$433,339,431	\$452,952,481
	Total Fringe Benefits Expense	\$100,636,264	\$128,868,720	\$151,560,400
2	Total Fillige Deliellis Expense	\$499,142,190	φ120,000,120	φ101,000,400

HARTFORD HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) ACTUAL ACTUAL ACTUAL LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 Total Full Time Equivalent Employees (FTEs) L. Total Nursing FTEs 1499.0 1567.4 1573.5 1 2 Total Physician FTEs 210.0 226.2 222.0 3 Total Non-Nursing, Non-Physician FTEs 3939.0 4044.7 4238.0 6,033.5 Total Full Time Equivalent Employees (FTEs) 5,648.0 5,838.3 Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$88,881 \$89,544 \$89,554 Nursing Fringe Benefits Expense per FTE \$22,155 \$26,629 \$29,965 2 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$111,036 \$116,173 \$119,520 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$182,119 \$185,972 \$184,122 1 Physician Fringe Benefits Expense per FTE \$47,922 \$55,305 \$61,608 2 Total Physician Salary and Fringe Benefits Expense per FTE \$230,041 \$245,730 3 \$241,278 Ο. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Non-Nursing, Non-Physician Salary Expense per FTE \$57,636 \$62,037 \$63,984 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$14,563 \$18,449 \$21,409 2 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE 3 \$72,199 \$80,486 \$85,393 Ρ. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$70,557 \$74,224 \$75,073 1 Total Fringe Benefits Expense per FTE \$17,818 \$22,073 \$25,120 2 \$100,193 Total Salary and Fringe Benefits Expense per FTE \$88,375 \$96,297 3 Total Salary and Fringe Ben. Expense per Statistic Total Salary and Fringe Benefits Expense per Patient Day \$2,268 \$2,591 \$2,515 \$12,096 \$14,655 2 Total Salary and Fringe Benefits Expense per Discharge \$13,822 3 Total Salary and Fringe Benefits Expense per EPD \$1,578 \$1,691 \$1,703

\$8,419

\$1,062

\$5,664

\$9,295

\$1,098

\$6,035

\$9,635

\$1,084

\$6,131

Total Salary and Fringe Benefits Expense per ED

Total Salary and Fringe Benefits Expense per CMAEPD

Total Salary and Fringe Benefits Expense per CMAED

4

5